# IN THE UNITED STATES DISTRICT COURT IN AND FOR THE DISTRICT OF DELAWARE

KAREN BARKES, individually;	)
TINA GROSSMAN as next friend of	)
BRITTANY BARKES; TINA	)
GROSSMAN as next friend of	)
ALEXANDRA BARKES; and	)
KAREN BARKES as administratrix	)
of the ESTATE OF CHRISTOPHER	)
BARKES,	) C. A. No. 06-104-JJJ
	)
Plaintiffs,	)
	)
v.	)
	)
FIRST CORRECTIONAL MEDICAL	)
INC.; STANLEY TAYLOR;	)
RAPHAEL WILLIAMS;	)
CERTAIN UNKNOWN INDIVIDUAL	)
EMPLOYEES OF STATE OF	)
DELAWARE DEPARTMENT OF	)
CORRECTION; CERTAIN	)
UNKNOWN INDIVIDUAL	)
EMPLOYEES OF FIRST	)
CORRECTIONAL MEDICAL, INC.,	)
And STATE OF DELAWARE,	)
DEPARTMENT OF CORRECTION,	)
	)
Defendants.	)

# APPENDIX TO OPENING BRIEF IN SUPPORT OF STATE DEFENDANTS' MOTION FOR SUMMARY JUDGMENT

# DEPARTMENT OF JUSTICE STATE OF DELAWARE

STEPHANI J. BALLARD, I.D. #3481 Deputy Attorney General Carvel State Office Building 820 North French Street, 6<sup>th</sup> Floor Wilmington, DE 19801 (302) 577-8400

DATED: October 15, 2007 Attorney for State Defendants

### **TABLE OF CONTENTS**

Affidavit of Correctional Officer Brian Emig	A000001
Affidavit of Correctional Officer Brian Forte	A000003
Affidavit of Correctional Officer Kimphus Daniels	A000005
Affidavit of Correctional Officer Denisha Young	A000007
Affidavit of Correctional Officer Sandra Rayne	A000009
Deposition of Karen Barkes	A000011
Complaint	A000032
State Defendants' Answer to Complaint and Crossclaim	A000042
FCM's Answer to State Defendants' Crossclaim	A000054
Rule 16 Scheduling Order	A000059
State Defendants' Rule 26(a)(1) Initial Disclosures	A000063
Plaintiffs' Rule 26(a)(1) Initial Disclosures	A000068
Plaintiffs' Responses to State Defendants 1 <sup>st</sup> Set of Interrogatories	A000075
Plaintiffs' Responses to State Defendants 1st Set of Requests for Admission	A000090
State Defendants' Responses to Plaintiffs' 1st Set of Interrogatories	A000096
State Defendants' Responses to Plaintiffs' 1st Set of Requests for Production	A000110
State Defendants' Letter Request re: Discovery Responses, 6/4/07	A000117
Plaintiffs' 8/6/07 Letter Response to Defendants 6/4/07 letter	A000120
Plaintiffs' Answers to State Defendants' 2 <sup>nd</sup> Set of Interrogatories	A000123
State Defendants' Supplementation of Initial Disclosures	A000131
State Defendants' Second Supplementation of Initial Disclosures	A000134

### RECORDS PRODUCED BY STATE DEFENDANTS IN DISCOVERY

FCM Medical/Intake Screening Documents, 11/13/04
Incident Reports, 11/14/04
Perry Phelps Email, 11/15/04 re: Barkes' suicide
Mortality Review, page 3
Toxicology Report
Standard Operating Procedure, Policy 190.04, re: Suicide Prevention
DOC Suicide Prevention Training Materials
DOC Suicide Prevention Training Logs
HRYCI Shift Commander's Report/Staffing Logs, 11/13-11/14/04
Warden Raphael Williams Employee Time Card, 2004
Documents re: Barkes' 1997 Incarceration
Documents re: Barkes' 11/13/07 VOP Arrest
FCM Contract with DOC

# IN THE UNITED STATES DISTRICT COURT IN AND FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et al.,	)	
DI 1 (100	)	
Plaintiffs,	)	
<b>v.</b>	)	C. A. No. 06-104-JJF
EIDGE CODDECTIONAL MEDICAL	)	
FIRST CORRECTIONAL MEDICAL	)	
INC.; et. al.,	)	
Defendants.	)	

#### **CERTIFICATE OF MAILING AND/OR DELIVERY**

The undersigned certifies that on October 15, 2007, she caused the attached, Appendix to Opening Brief in Support of State Defendants' Motion for Summary Judgment, to be electronically filed with the Clerk of Court using CM/ECF which will send notification of such filing to the following:

Jeffrey K. Martin, Esquire Martin & Wilson, P.A. 1508 Pennsylvania Ave., Suite 1C Wilmington, DE 19806 Daniel McKenty, Esquire Heckler & Frabizzio P.O. Box 128 Wilmington, DE 19899-0128

/s/ Stephani J. Ballard
Stephani J. Ballard, I.D. #3481
Deputy Attorney General
Carvel State Office Building
820 N. French Street, 6<sup>th</sup> Floor
Wilmington, DE 19801
(302)577-8400
Attorney for State Defendants

### IN THE UNITED STATES DISTRICT COURT IN AND FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et. al.,	)	
	)	
	)	
Plaintiffs,	)	
	)	
v.	)	
	)	
FIRST CORRECTIONAL MEDICAL	)	
INC.; STANLEY TAYLOR, et. al.	)	C. A. No. 06-104-JJF
•	)	
Defendants,	)	

#### Affidavit of Correctional Officer Brian Emig

- 1. I am a Correctional Officer employed by the State of Delaware Department of Correction. I held that position, and was working as a CO at Howard R. Young Correctional Institution in November 2004.
- 2. On Saturday, November 13, 2004, I was working 8:00 a.m. to 4:00 pm. shift in the Booking and Receiving (B/R) area of the prison. I recall an inmate named Christopher Barkes arriving at the facility to be held on a violation of probation that afternoon. I recall Barkes asking me if he (Barkes) would be going downstate (to the VOP center) and I said yes.
- 3. Barkes seemed fine, and did not act differently from other inmates. I believe I was the CO who strip searched Barkes. I would have called medical if anything had seemed wrong with this inmate.
- 4. Barkes was given an intake medical examination by a nurse. He was medically cleared, and then I brought him back to his cell in the B/R area.
- 5. I also worked the morning shift on Sunday November 14, 2004 in another area of the prison, and I responded to B/R when the medical emergency Code was called. When

I arrived, Barkes was on the floor and medical personnel were doing CPR. I was not involved in the resuscitation efforts.

BE IT REMEMBERED that on this <u>IS</u> day of <u>Obbber</u>, 2007, personally appeared before me, the Subscriber, a Notary Public for the State and County aforesaid, **BRIAN EMIG**, who, being by me duly sworn according to law did depose and say that the foregoing statement is correct to the best of his knowledge, information and belief.

BRIANEMIG

SWORN TO AND SUBSCRIBED before me on this /5 day of Oct

\_\_\_\_, 2007(

Notary Pub

### IN THE UNITED STATES DISTRICT COURT IN AND FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et. al.,	)	
	j	
Plaintiffs,	)	
v.	)	
FIRST CORRECTIONAL MEDICAL INC.; STANLEY TAYLOR, et. al.	) ) )	C. A. No. 06-104-JJF
Defendants,	) )	

### Affidavit of Correctional Officer Brian Forte

- 1. I am a Correctional Officer employed by the State of Delaware Department of Correction. I held that position, and was working as a CO at Howard R. Young Correctional Institution in November 2004.
- On November 13, 2004, I was working 8:00 a.m. to 4:00 pm. shift in the Booking 2. and Receiving area of the prison. I recall an inmate named Christopher Barkes arriving at the facility to be held on a violation of probation that afternoon.
- Barkes exhibited no unusual behavior during his intake. I remember Barkes as 3. being mild mannered, respectful, and clean cut.
- 4. Barkes was seen by an FCM nurse for a medical evaluation as part of his intake. The nurses do the medical intake just down the hall from the Booking and Receiving area.
- If I had observed any unusual behavior by this inmate, I would have alerted the 5. medical staff.

BE IT REMEMBERED that on this \_\_\_\_\_\_ day of Ocheber\_, 2007, personally appeared before me, the Subscriber, a Notary Public for the State and County

Page 4 of 144 Case 1:06-cv-00104-JJF Document 51-2 Filed 10/15/2007

aforesaid, BRIAN FORTE, who, being by me duly swom according to law did depose and say that the foregoing statement is correct to the best of his knowledge, information and belief.

SWORN TO AND SUBSCRIBED before me on this //day of Oct, 2007.

## IN THE UNITED STATES DISTRICT COURT IN AND FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et. al.,	)	
	)	
Plaintiffs,	)	
v.	)	
FIRST CORRECTIONAL MEDICAL	)	
INC.; STANLEY TAYLOR, et. al.	) C. A. No. 06-104-J	JF
Defendants.	)	

### Affidavit of Correctional Officer Kimphus Daniels

- 1. I am a Correctional Officer employed by the State of Delaware Department of Correction. I held that position, and was working as a CO at Howard R. Young Correctional Institution in November 2004.
- 2. On November 13-14, 2004, I was working on the overnight shift (midnight to 8:00 a.m.), in the Booking and Receiving area of the prison. I was the lead worker on that shift, and was relieved by CO Sandra Rayne at 0800.
- 3. An inmate named Christopher Barkes was the only inmate being housed in Booking and Receiving at the time. Barkes was being held on a violation of probation, and was to be transferred to another facility on Monday, November 15, 2004.
- 4. During the overnight, I recall that I saw Barkes asleep. I noticed nothing at all strange or unusual with Barkes' behavior on that overnight shift. No one else on the shift mentioned anything unusual about him.
- 5. If I had observed any erratic behavior by this inmate, I would have alerted the medical staff.
- 6. Barkes was served breakfast before 8:00 a.m.

BE IT REMEMBERED that on this // day of Oct , 2007
personally appeared before me, the Subscriber, a Notary Public for the State and County
aforesaid, KIMPHUS DANIELS, who, being by me duly swom according to law did
depose and say that the foregoing statement is correct to the best of his knowledge,
information and belief.

#### IN THE UNITED STATES DISTRICT COURT IN AND FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et. al.,	)	
	)	
	)	
Plaintiffs,	)	
	)	•
<b>v.</b>	)	
	)	
FIRST CORRECTIONAL MEDICAL	)	
INC.; STANLEY TAYLOR, et. al.	)	C. A. No. 06-104-JJF
	)	
Defendants.	)	

#### Affidavit of Correctional Officer Denisha Young

- 1. I am a Correctional Officer employed by the State of Delaware Department of Correction. I held that position, and was working as a CO at Howard R. Young Correctional Institution in November 2004.
- 2. On November 13-14, 2004, I was working on the overnight shift (midnight to 8:00 a.m.), in the Booking and Receiving (B/R) area of the prison. I recall inmate Christopher Barkes as a VOP. He was being housed in the first cell in the B/R area.
- 3. I did periodic checks on Barkes on the overnight shift and he seemed fine. I took him breakfast at 6:30 and he ate. I saw nothing at all strange about him, and he did not appear to me to be upset.
- 4. I stayed on to work overtime on the next shift (November 14, 2004, 0800-1600), but I was not working in B/R. I recall that the prison was locked down after the Code was called.

personally appeared before me, the Subscriber, a Notary Public for the State and County aforesaid, DENISHA YOUNG, who, being by me duly swom according to law did

Page 8 of 144

depose and say that the foregoing statement is correct to the best of her knowledge, information and belief.

SWORN TO AND SUBSCRIBED before me on this 15 day of 0ct, 2007.

# IN THE UNITED STATES DISTRICT COURT IN AND FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et. 21.,	)
Plaintiffs,	) ) )
<b>v.</b>	
FIRST CORRECTIONAL MEDICAL INC.; STANLEY TAYLOR, et. al.	) ) C. A. No. 06-104-J.H
Defendants.	)

### Affidavit of Correctional Officer Sandra Rayne

- 1. I am a Correctional Officer employed by the State of Delaware Department of Correction. I held that position, and was working as a CO at Howard R. Young Correctional Institution in November 2004.
- 2. On Sunday, November 14, 2004, I was working 8:00 a.m. to 4:00 pm. shift in the Booking and Receiving (B/R) area of the prison. At approximately 11:35 a.m. CO Martelli yelled "Cpl. Rayne, come here!" I responded to the cell where inmate Christopher Barkes was housed and found him hanging and CO Martelli attempting to get him down. I ran and got the cutters and assisted CO Martelli in cutting down Barkes. A medical emergency Code was called by CO Dorene Fields and medical personnel arrived quickly.
- 3. Earlier that morning, I had asked Barkes if he wanted to take a shower and he said no. I asked him "are you OK?" and he said yes. In my experience, it was not unusual for an inmate not to want to take a shower.

4. Barkes was sitting or lying down in his cell when I saw him that morning. He did not appear to be depressed, and I did not notice anything about him I considered unusual. If there had been a problem evident, we would have called medical.

BE IT REMEMBERED that on this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_, 2007, personally appeared before me, the Subscriber, a Notary Public for the State and County aforesaid, SANDRA RAYNE, who, being by me duly sworn according to law did depose and say that the foregoing statement is correct to the best of her knowledge, information and belief.

SWORN TO AND SUBSCRIBED before me on this // day of \_\_\_\_\_\_, 2007.



In the Matter Of:

Barkes, et al.

V.

First Correctional Medical, Inc., et al.

C.A. # 06-104 JJF

**Transcript of:** 

Karen Barkes

**September 24, 2007** 

Wilcox and Fetzer, Ltd. Phone: 302-655-0477

Fax: 302-655-0497

Email: depos@wilfet.com Internet: www.wilfet.com

IN THE UNITED STATES DISTRICT COURT

FOR THE DISTRICT OF DELAWARE

KAREN BARKES, individually, et al., Plaintiffs, C.A. No. 06-104 JJF v. FIRST CORRECTIONAL MEDICAL, INC., et al., Defendants.

Deposition of KAREN S. BARKES taken pursuant to notice at the offices of the Department of Justice, 820 North French Street, 6th Floor, Wilmington, Delaware, beginning at 10:05 a.m., on Monday, September 24, 2007, before Kimberly A. Hurley, Registered Merit Reporter and Notary Public. APPEARANCES:

> JEFFREY K. MARTIN, ESQUIRE MARGOLIS EDELSTEIN 750 South Madison Street - Suite 102 Wilmington, Delaware 19801 for the Plaintiffs

> GERALD J. HAGER, ESQUIRE HECKLER & FRABIZZIO 800 Delaware Avenue - Suite 200 Wilmington, Delaware 19801 for the Defendant First Correctional Medical, Inc.

STEPHANI J. BALLARD, ESQUIRE DEPARTMENT OF JUSTICE 820 North French Street - 6th Floor Wilmington, Delaware 19801 for the State defendants WILCOX & FETZER 1330 King Street - Wilmington, Delaware 19801 (302) 655-0477 www.wilfet.com

Barkes, et al. v. First Correctional Medical, Inc., et al.

	2		Λ.
		1	O When did one as to high school and solven if
1	KAREN S. BARKES,	1	Q. Where did you go to high school and college if
2	the witness herein, having first been	2	you went?
3	duly sworn on oath, was examined and	3	A. I went to John Dickinson, and I went to an
4	testified as follows:	4	adult ed in Washington, D.C.
5	BY MS. BALLARD:	5	Q. Is that a GED?
6	Q. Good morning. Is it Barkes?	6	A. No. I just took classes.
7	A. Yes.	7	Q. College classes?
8	Q. I'm sure your attorney has discussed how a	8	A. No. High school classes.
9	deposition works with you, but just to refresh your	9	Q. Do you have a high school diploma?
10	memory, I'll be asking you questions. It's an informal	10	A. No.
11	process, but the court reporter is taking down everything	11	Q. Where are you living right now?
12	we say. So it's important that only one of us speak at	12	A. 200 Garrett Court no, Garrett Road.
13	once. If you answer with a "yes" or "no," do that	13	Q. How long have you been there?
14	verbally like "yes," "no," not "uh-huh," because that's	14	A. Just under a year.
15	hard to understand on the record.	15	Q. Were you living
16	Also, if you don't understand one of my	16	A. 3111 Crystal Court.
17	questions, let me know. Okay?	17	Q. Before that?
18	A. Okay.	18	A. Yes.
19	Q. Just before we get started, I'm sure you	19	Q. What do you do for a living?
20	discussed this with your attorney, obviously we're going	20	A. I'm a house cleaner.
21	to be covering some areas that are probably going to be	21	Q. Do you work for an agency or do you just work
22	difficult with you. Your marriage with Christopher, your	22	on your own?
23	recovery issues, yours and his, and I know it won't be	23	A. On my own.
24	easy for you to answer some of these questions, but	24	MS. BALLARD: Could we go off the record?
	3		5
1	because you did file a lawsuit, all these things are at	1	(Discussion off the record.)
2	issue, so we have to cover them. Okay?	2	BY MS. BALLARD:
3	A. Okay.	3	Q. How long have you been employed as I guess I
4	Q. If you need to take a break at any time, just	4	would say a self-employed house cleaner?
5	let me know and we will do that.	5.	A. About 15 years.
6	A. All right.	6	Q. Do you have any children?
7	Q. Other than your attorney, did you discuss the	7	A. No.
8	fact that you were having a deposition with anybody	. 8	Q. When did you and Chris get married?
9	before coming here?	9	A. April 5th, 2003.
10	A. Yes. My family and friends.	10	Q. How long did you know Chris before you got
11	Q. What did you discuss with them?	11	married?
12	A. Just basically that I was coming.	12	A. Since we were 18 or 19.
13	Q. Did you talk about areas that we might cover in	13	Q. How did you meet?
14	the deposition, about Chris or yourself?	14	A. His first wife's graduation party.
15	A. No, not really.	15	Q. Did you all go to high school together?
16	Q. Did you do anything else to prepare?	16	A. No. It was a college graduation.
17	A. Jeff and I talked.	17	Q. So you were at the party and he was at the
18	Q. You don't have to talk about whatever you	1.8	party?
19	talked about with Jeff.	19	A. Uh-huh.
20	Did you look at any documents at home or	20	Q. You didn't know him from going to school
21	anything like that?	21	together or anything like that?
22	A. I read over the suit.	22	A. No. I knew him from AA meetings, but we met at
		Ì	· · · · · · · · · · · · · · · · · · ·
1	O. How old are you?	123	the party.
23 24	Q. How old are you?  A. Thirty-nine.	23 24	the party.  Q. Did you keep in touch all those years or did

<sup>2 (</sup>Pages 2 to 5)

<u> </u>	6		
1	you meet up again later?	1	we would figure things out when he got out.
2	A. On and off I'd see him.	2	Q. Had he been picked up on a VOP you know that
3	Q. Were you ever married before you were married	3	that means violation of probation?
4	to Chris?	4	A. Yes.
5	A. No.	5	Q. Had he been picked up on a violation of
6	Q. Have you been married since?	6	probation before this?
7	A. No.	7	A. Yes.
8	Q. Have you lived with anyone since Chris's death?	8	Q. How long before this?
9	A. No.	9	A. March of 2004.
10	Q. Do you keep a diary?	10	Q. Did he have to spend time either in prison or
11	A. No.	11	in a level 4 facility or was he out on his own?
12	Q. Do you keep like a date book in which you write	12	A. No. He was at the VOP down in Sussex.
13	important events or anything like that?	13	Q. Was that the 60 days you were referring to?
14	A. No.	14	A. Maybe it's Georgetown. No. I had known from
15	Q. Did you in 2003 or 2004?	15	before that probably a violation of probation would be
16	A. No.	16	60 days at the maximum.
17	Q. Tell me about the last time you talked to Chris	17	Q. What did you mean by telling him he could do
18	prior to his death. The very last time.	18	that easily?
19	A. He called me on the 13th and said he was in	19	A. Because he did a year and a half or two and
20	Gander Hill. He said that he hadn't gotten high, that	20	a half years prior.
21	they got him on a probation violation, that he was tired	21	Q. In prison?
22	of messing up and he's sorry to hurt me and he couldn't	22	A. Yes.
23	hurt me anymore and to tell the girls that he loved them.	23	O. But the VOP
24	Q. And the girls refer to his	24	A. He said that he couldn't deal with being in
	7		9
	•		
	A. Brittany and Allie.	1	prison again and that he couldn't deal with getting out
2	Q. Who are his daughters from a previous marriage?	2	and having to rebuild his life again.
3	A. Yes.	3	Q. Did he say that during this November 13th
4	Q. Did they live with the two of you?	4	conversation or some other time?
5	A. No.	-5	A. Yes. No, that. He told me he was going to
6	Q. I guess you answered this. Did he tell you why	6	kill himself.
7	he had been arrested?	7	Q. He told you during that conversation?
8	A. A probation violation.	8	A. That he wanted to.
9	Q. Did he say what it was?	9	Q. What exactly did he say to you?
10	A. No. They would stay weekends with us.	10	A. He said, "I can't live this way anymore." I
11	Q. The girls would?	11	knew that that meant that he was that he wanted to
12	A. Yes.	12	kill himself.
13	Q. This was on a weekend, correct?	13	Q. What did you do about that?
14	A. Yes.	14	A. I told
15	Q. Were they at your house at the time?	15	Q. Did that concern you?
16	A. No.	16	A. Yes. I told him that he would be fine, he
17	Q. Is there anything else you remember about the	17	could do up to the 60 days and then when he got out, that
18	conversation? How long was the conversation?	18	we would work on getting things back together.
19	A. Three minutes.	19	Q. What did he say?
20	Q. Anything else you remember about it?	20	A. He said he didn't think he could do it and just
21	A. I was adamant that I wasn't going to say	21	tell the girls that he loved them and that he loved me
1		22	and he was sorry that he hurt me.
22	anything to the girls, that he should call them himself,	}	
1	anything to the girls, that he should call them himself, and I told him that he could do the 60 days violation of probation standing on his head and that he should — that	23 24	Q. Were you concerned at that point that he actually would kill himself?

	10	T	12
1	A. I thought he couldn't kill himself because he	1	him.
2.	was in jail.	2	Q. How did you presume that they knew that?
3	Q. Do you remember answering some written	3	A. Because of his record before, his previous
4	questions in connection with this case maybe four or five	4	suicide attempt in Gander Hill and his history.
5	months ago	5	Q. Prior to that conversation on November 13th,
6	A. Yes.	6	what was the last prior contact you had with Chris before
7	Q your attorney sent you?	7	he went into prison, either in person or by phone?
8	Do you recall being asked what about Chris	8	A. That morning we had talked.
9	prior to that incarceration in November of 2004 would	9	Q. On the phone?
10	have put someone on alert that he was a suicide risk?	10	A. Uh-huh.
11	A. Yes.	11	MR. MARTIN: Yes?
12	Q. Isn't it correct that you didn't mention that	12	THE WITNESS: Yes.
13	he told you that he would kill himself in that phone	13	BY MS. BALLARD:
14	conversation?	14	Q. And what was the substance of that
15	A. I knew that nobody would know that phone	15	conversation?
16	conversation.	16	A. He was supposed to come over at noon and we
17	Q. But isn't that something that you considered	17	were going to have lunch together and do some stuff
18.	certainly an alert that he was a risk to kill himself at	18	around the house.
19	that time?	19	Q. Anything else you talked about that morning?
20	A. I don't understand.	20	A. Nothing remarkable.
21	Q. Well, given the fact that you were asked about	21	Q. What time was the last conversation when you
22	signs that Christopher could have been a risk to kill	22	told me about before, if you remember? What time of day?
23	himself, you didn't mention that he actually told you	23	A. 6 o'clock.
24	that he wanted to kill himself or something you	24	Q. P.m.?
	11	╁──	13
1	interpreted that way the day he went into prison. Is	1	A. Yes.
2	there a reason you didn't mention that?	2	Q. Were you concerned between 12:00 and 6:00 that
3	A. To me the previous suicide attempts, the fact	3	he hadn't shown up at your house?
4	that his probation officer knew that he was suicidal and	4	A. Yes.
5	he went in on a probation violation, the fact that he was	5	Q. Did you try to call anybody to find out where
6	on medication, the fact that he was a drug addict and	6	he was?
7	alcoholic, those were the factors that	7	A. Yes.
. 8	Q. Do you have personal knowledge of exactly what	8	Q. Who did you call?
9	he told the personnel in prison when he got there that	9	A. Aunt Helen. I tried to call his cell phone.
10	day?	10	Q. I take it you didn't reach Chris by cell?
11	A. No.	11	A. No.
12	Q. Who is his probation officer that you referred	12	Q. Did you talk to Aunt Helen?
13	to?	13	A. Yes. She said that he had left around 12:00
14	A. He had just changed probation officers at the	14	and that she hadn't seen him.
15	1st of November, and I'm unaware of her name.	15	Q. What's Helen's full name?
16	Q. So in November 2004 he had a new probation	16	A. Helen Young.
17	officer?	17	Q. When was the last time you actually saw or
18	A. Yes.	18	spent time with Chris in person before he went into
19	Q. Did you after having that conversation with	19	prison on November 13th, 2004?
20	Chris call anyone to try to take steps to help him? Did	20	A. Friday evening.
	you do anything in response to what he told you?	21	
21		}	Q. So that would be Friday, the 12th?
	A No I hand up the phone and I theti-		
21 22	A. No. I hung up the phone and knowing that he	22	A. Yes.
	A. No. I hung up the phone and knowing that he was in prison and that they knew the information about him being suicidal, I knew that they would take care of	22 23 24	A. 1 es. Q. Where did you see him? A. At Aunt Helen's house.

			16
1	Q. Is it correct he was living with her at that	1	in early November that would have caused that to be put
2	time?	2	in place?
3	A. For a week he stayed there.	3	A. No. It was from his prior violation. He went
4	Q. For a week prior to going into Gander Hill?	4	back to court in November.
5	A. Yes.	5	Q. From the March violation?
6	Q. Why was he staying with her that week?	6	A. I'm unsure.
7	A. They put him on house arrest and so it was	7	Q. Is it your recollection he had some kind of
8	unclear if he could stay at our house until the probation	8	court appearance in early November 2004?
9	officer asked if there was somewhere else that he could	9	A. Yes.
10	stay, and he was staying at Aunt Helen's until they could	10	Q. Did a judge issue an order that had to do with
11	figure that out.	11	whether he could have contact with you or live with you?
12	Q. Why wouldn't he have been staying at home?	12	A. No.
13	A. There was always a thing if there was a	13	Q. Did you ever see anything written that
14	no-contact order.	14	addressed whether he could live with you or not?
15	Q. Are you saying there was a no-contact order at	15	A. No.
16	that time?	16	Q. Did anybody, other than Chris, tell you he
17	A. It was always unclear.	17	should not be living at the house or anything like that?
18	Q. Did you think there was a no-contact order of	18	A. The probation officer.
19	him to have no contact with you at that time?	19	Q. She told you that?
20	A. No.	20	A. Yes.
21	Q. Was there a no-contact for you to have no	21	Q. You don't recall her name?
22	contact with him?	22	A. No.
23	A. No, there was never a no-contact order. The	23	Q. How did she tell you that? Did she call you?
2,4	probation officer would say that we couldn't reside	24	A. No. I had went with him.
	15		17
E .			
1	together, but the court never said that we couldn't	1	Q. Where?
1 2	together, but the court never said that we couldn't reside together. The judge never said.	. 1 2	Q. Where? A. To the Plummer Center when he went in to see
l	-		
2	reside together. The judge never said.	2	A. To the Plummer Center when he went in to see
2 3	reside together. The judge never said.  Q. Were you residing together two weeks prior to	2 3	A. To the Plummer Center when he went in to see her for the first time.
2 3 4	reside together. The judge never said.  Q. Were you residing together two weeks prior to his suicide?	2 3 4	A. To the Plummer Center when he went in to see her for the first time.  Q. Is that before or after the court appearance?
2 3 4 5	reside together. The judge never said.  Q. Were you residing together two weeks prior to his suicide?  A. Yes.  Q. So why wasn't it a problem at that point?  A. Because when he went in to get a different	2 3 4 5	<ul> <li>A. To the Plummer Center when he went in to see her for the first time.</li> <li>Q. Is that before or after the court appearance?</li> <li>A. After.</li> <li>Q. So you and Chris sat with the probation officer at the Plummer Center?</li> </ul>
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2 3 4 5 6 7 8 9 10 11	reside together. The judge never said.  Q. Were you residing together two weeks prior to his suicide?  A. Yes.  Q. So why wasn't it a problem at that point?  A. Because when he went in to get a different probation officer, they were the ones who had a problem.  Q. Do you know why?  A. No.  Q. You said he was going to come over for lunch.  Would that have been a violation of what the probation	2 3 4 5 6 7 8 9 10 11 12	A. To the Plummer Center when he went in to see her for the first time.  Q. Is that before or after the court appearance?  A. After.  Q. So you and Chris sat with the probation officer at the Plummer Center?  A. No.  Q. I'm not following what happened in November.  It's kind of important. So if you can  A. He went in to sign up with this new probation officer. Then he called me on my cell phone and said,
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1	18		20
1	Q. I thought he went to the Plummer Center by	1	A. I don't have it.
. 2	himself. Did you go with him?	2	Q. Do you know where it is?
3	A. He went in by himself. I sat in the car,	3	A. No. If I had it, I would have given it to you.
4	Q. Then this female probation officer came out and	4	Q. I'm sorry. We kind of got off track, You said
5	spoke to you?	5	you saw Chris on Friday, the 12th?
6	A. Yes. With a man. It was a female and a man	6	A. Yes.
7	came out.	7 -	Q. In person?
8	Q. Then did you talk to Chris about it afterwards	8	A. Yes.
و ا	or was he not to have contact with you?	9	Q. That was because you went to Aunt Helen's
10	A. No. They said that he could have contact. We	10	house?
11	just couldn't reside in the same house.	11	A. Yes.
12	Q. Did that bother you?	12	Q. Was that just to pay a visit to him?
13	A. Yeah. I didn't understand why.	13	A. Yes.
14	Q. So what were you going to do about that?	14	Q. What did you talk about at that time, you and
15	A. Well, he had written a letter to the judge	15	Chris?
16	asking if we could reside together and that he figured he	16	A. How my day at work went, how things were going
17	would talk to his probation officer the next week, and we	17	with him.
18	were working on other places that he could stay.	18	Q. Just routine catching up?
19	Q. So at some point	19	A. Uh-huh.
20	A. Other options.	20	MR. MARTIN: Yes?
21	Q. Is it correct at some point, maybe about a week	21	THE WITNESS: Yes.
22	before he went into Gander Hill on November 13th, he	22	BY MS. BALLARD:
23	moved into Aunt Helen's house?	23	Q. What was Chris's demeanor? Did he seem okay?
24	A. Yes.	24	Did he seem like himself
	19		21
	O. What did ha take with him?		21
1	Q. What did he take with him?	1-1	A. Yes.
2	<ul><li>Q. What did he take with him?</li><li>A. Just his clothes.</li></ul>	2	<ul><li>A. Yes.</li><li>Q. – or anything unusual?</li></ul>
2	<ul><li>Q. What did he take with him?</li><li>A. Just his clothes.</li><li>Q. Would it be during that week that you think he</li></ul>	2	<ul><li>A. Yes.</li><li>Q. — or anything unusual?</li><li>A. No.</li></ul>
2 3 4	<ul><li>Q. What did he take with him?</li><li>A. Just his clothes.</li><li>Q. Would it be during that week that you think he wrote a letter to the judge?</li></ul>	2 3 4	<ul> <li>A. Yes.</li> <li>Q. — or anything unusual?</li> <li>A. No.</li> <li>Q. At that point in time, let's say before his</li> </ul>
2 3 4 5	<ul><li>Q. What did he take with him?</li><li>A. Just his clothes.</li><li>Q. Would it be during that week that you think he wrote a letter to the judge?</li><li>A. Oh, yes.</li></ul>	2 3 4 5	<ul> <li>A. Yes.</li> <li>Q or anything unusual?</li> <li>A. No.</li> <li>Q. At that point in time, let's say before his arrest, were you under the impression that he was abusing</li> </ul>
2 3 4 5 6	<ul> <li>Q. What did he take with him?</li> <li>A. Just his clothes.</li> <li>Q. Would it be during that week that you think he wrote a letter to the judge?</li> <li>A. Oh, yes.</li> <li>Q. Did you see the letter?</li> </ul>	2 3 4 5 6	<ul> <li>A. Yes.</li> <li>Q or anything unusual?</li> <li>A. No.</li> <li>Q. At that point in time, let's say before his arrest, were you under the impression that he was abusing alcohol or drugs?</li> </ul>
2 3 4 5 6 7	<ul> <li>Q. What did he take with him?</li> <li>A. Just his clothes.</li> <li>Q. Would it be during that week that you think he wrote a letter to the judge?</li> <li>A. Oh, yes.</li> <li>Q. Did you see the letter?</li> <li>A. Yes.</li> </ul>	2 3 4 5 6 7 0	<ul> <li>A. Yes.</li> <li>Q or anything unusual?</li> <li>A. No.</li> <li>Q. At that point in time, let's say before his arrest, were you under the impression that he was abusing alcohol or drugs?</li> <li>A. No.</li> </ul>
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	22		24
1	some of yours and Chris's, and they make reference to the	1	Q. What made you seek treatment at that time?
2	fact that you have both been in recovery for substance	2	A. They suggested it. When Chris was going to see
3	addiction. Would you agree with that?	3	his person, they suggested that I come in for counseling.
4	A. Yes.	4	Q. Did you have couples counseling?
5	Q. How long have you been in recovery?	5	A. No. We were going to.
6	A. Since I was 17. 1985.	6	Q. But for that month you got separate counseling?
7	Q. What substances did you use at that time?	7	A. Yes.
8	A. Pot, alcohol, pills, PCP, LSD.	8	Q. And he got separate counseling?
9	Q. Have you had relapses since or have you been	9	A. Yes.
10	completely in recovery?	10	Q. What was he treating for at that time?
11	A. Yes.	11	A. Bipolar.
12	Q. You went into recovery when you were about 18?	12	Q. So he was seeing a psychiatrist?
13	A. Seventeen.	13	A. And a psychologist.
14	Q. You have been —	14	Q. Do you know what medications he was on, if any?
15	A. Clean ever since.	15	A. Effexor, Depakote, Seroquel, and another one I
16	Q. Did you treat medically when you were 17 for	16	can't remember.
17	those conditions or did you go into —	17	Q. You named Stanley Taylor as a defendant in this
18	A. I was in a rehab.	18	case. Are you aware that he's a former commissioner of
19	Q. Do you remember the name of that place?	19	the Department of Corrections?
20	A. Straight, Incorporated.	20	A. Yes.
21	Q. Was that in Delaware?	21	Q. And he's now retired?
22	A. No. Springfield, Virginia.	22	A. Yes.
23	Q. Since that time when you were 17, have you been	23	Q. Have you ever had any personal dealings with
24	in counseling for addiction issues or recovery issues?	24	Commissioner Taylor?
	23		25
1	A. No.	1	A. No.
2	Q. But you go to AA?	2	Q. To your knowledge, did Chris ever have any
3	A. Yes.	3	personal dealings with him?
4	Q. In 2004 prior to Chris's death, were you being	4	A. No.
5	treated for depression or any other mental health	5	Q. Are you aware that Raphael Williams was and is
6	conditions?	6	the warden of Howard Young Correctional Institution,
7	A. I had just started going to see the	7	which we're also calling Gander Hill?
8	counselor one of the counselors that was in the group	8	A. Yes.
9	that Chris was going to, and they started me on an	9	Q. Have you ever had any personal dealings with
10	antidepressant, but	10	Warden Williams?
11	Q. What group was that?	11	A. Somebody from the warden's office called me or
12	A. Kalkstein Associates.	12	talked to me on the phone. I am unsure if it was him.
13	Q. Do you remember the name of your counselor?	13	That's who I asked for.
14	A. No.	14	O. When was this?
15	Q. You got an antidepressant?	15	A. After Chris died.
16	A. Yes.	16	Q. How long after? Or did they call you to notify
17	Q. Do you remember the name of that?	17	you, or are you referring to something else?
18	A. Wellbutrin.	18	A. No. About a week or two after he died I
19	Q. How long did you take that?	19	called.
20	A. I'm going to say a couple months.	20	Q. You called the warden's office?
21	Q. Actually, I'm sorry, when did you start with	21	A. Yes.
22	Kalkstein Associates? When did you start treating with	22	Q. You spoke with somebody?
23	them?	23	A. I asked for the warden and they put somebody
24	A. Maybe a month before his death.	24	I was unclear the person's name or his name at the time,
- · ·	11. mayoo a month ootote iiis death.	<u> </u>	2 mas antoion the potential traine of the hand at the time,

1	26		28
1	and I just asked how did they know that he was suicidal	1	Q. In September or October 2004, was he abusing
2	and how could they say that he wasn't.	2	drugs or alcohol?
3	Q. Is it possible you spoke to the deputy warden	3	A. Not to my knowledge.
4	and his name was Perry Feltz?	4	Q. Would you agree that Chris had his own long
5	A. I'm unsure. They had said that they were the	5	history of substance abuse?
6	warden.	6	A. Yes.
7	Q. So the person who spoke said, "I'm the warden"?	7	Q. How far back does that go?
8	A. Yes.	8	A. When he was a teenager.
9	Q. Raphael Williams, did he have an accent,	9	Q. I believe you said you met him when he was 18.
10	because he has a Jamaican accent?	10	Were you aware at that time that he had substance abuse
11	A. No. But I had asked for the warden and	11	issues?
12	somebody got on the phone and said they were the warden.	12	A. Yes.
13	Q. I'm asking because we have records showing	13	Q. How did you become aware of that?
14	Warden Williams was on vacation for a period of time and	14	A. I met him in AA.
15	there was a deputy warden whose name was Perry Feltz.	15	Q. When you were both young?
16	A. I don't know. He wasn't clear that he had said	16	A. Yes.
17	this is the deputy warden versus the warden.	17	Q. Seventeen or eighteen?
18	Q. He probably was acting warden at that point.	18	A. Yes. Well, 18 or 19.
19	To your knowledge, did Chris ever have	19	Q. Because Chris was a year or two older than you?
20	personal dealings with Warden Raphael Williams?	20	A. He was a year. I lived in Washington for the
21	A. No.	21	first year.
22	Q. If I were to represent to you that	22	Q. Washington, D.C.?
23	Raphael Williams was not working the weekend your husband	23	A. Yes.
24	committed suicide, would you have any basis to dispute	24	Q. Did he live in Washington, D.C.?
	. 27		. 29
1	that?	1	A. No. When I moved here, I met him.
2	A. No.	2	Q. When he was a young man, 18, 19, what
3	Q. Why did you sue Commissioner Taylor in	3	substances did he have problems with at that time?
4	connection with your husband's death?	4	A. He was sober at that time.
- 5	A. I don't know any	5	Q. What substances had caused him to go into
6	Q. Why did you sue Warden Williams?	6	treatment?
7	A. Those were the two in charge of the prison.	7	A. Pot, alcohol, cocaine.
8	Q. Would it be accurate to say you sued them	8	Q. Over the years did he continue to abuse those
9 .	because they were in charge of the institution?	9	substances off and on?
10	A. Yes.	10	A. No. He was sober for 10 years.
11	Q. We covered some of this. We talked about	11	Q. From about 18 to 28?
12	November. Let's go back to October 2004. Was Chris	12	A. Yes.
13	living with you in your house at that point?	13	Q. What happened?
14	A. Yes.	14	A. He had started abusing as far as my
15	Q. How would you describe your relationship with	15	knowledge, he started abusing prescription drugs.
l	him in that last month you actually lived together?	16	Q. Do you know what they were?
16	A. We did what we normally did. He was working at	17	A. Percocet.
16 17		18	Q. Anything else?
17	Pepsi. We would get the girls certain days and have		·
17 18	Pepsi. We would get the girls certain days and have dinner and go see their games.	ì	A. We generally don't use specific names, so no.
17 18 19	dinner and go see their games.	19	A. We generally don't use specific names, so no.     O. How about alcohol when he was in his 20s or
17 18 19 20	dinner and go see their games.  Q. How were you getting along?	19 20	Q. How about alcohol when he was in his 20s or
17 18 19 20 21	dinner and go see their games.  Q. How were you getting along?  A. We got along fine.	19 20 21	Q. How about alcohol when he was in his 20s or 30s?
17 18 19 20 21 22	dinner and go see their games.  Q. How were you getting along?  A. We got along fine.  Q. Would you say you were having any marital	19 20 21 22	<ul><li>Q. How about alcohol when he was in his 20s or 30s?</li><li>A. Before the accident he was drinking.</li></ul>
17 18 19 20 21	dinner and go see their games.  Q. How were you getting along?  A. We got along fine.	19 20 21	Q. How about alcohol when he was in his 20s or 30s?

<sup>8 (</sup>Pages 26 to 29)

	Raien b.	٠ ـــــ	
	30		32
1	and went into a rehab and then he got out and drank that	1	A. No. It would be prescription pills.
2	day and had the car accident.	2	Q. Did he abuse alcohol while you were married?
3	Q. Were you with him as his girlfriend or a	3	A. There would be binges. He would go on a day
4	friend?	4	binge.
5	A. No.	5	Q. With alcohol?
6	Q. I want to be clear if I'm asking from your own	6	A. Uh-huh.
7	recollection or if you just got this from Chris.	7	MR. MARTIN: Yes?
8	MR. MARTIN: Let me also suggest you pause	8	THE WITNESS: Yes.
9	for a moment after Ms. Ballard finishes her question	9	BY MS. BALLARD:
10	before you answer because your responses are coming right	1.0	Q. We start talking and it's hard to remember to
11	on the heels of her question and it's difficult for our	11	say "yes" and "no."
12	reporter to take all that down. Just give her a moment	12	Did you say you got married in April of
13	before you answer. Thank you.	13	2003?
14	BY MS. BALLARD:	14	A. Yes.
15	Q. I don't remember what my question was. When	15	Q. Let's talk about that time, April 2003 until
16	you're talking about Chris either being in recovery or	16	his death. During times when he would have these binges
17	using substances say when he was in his 20s or 30s and	17	or relapses, how would be behave?
18	before you got married, are you speaking from your	18	A. I'm unsure what you're asking me.
19	personal recollection or things Chris told you over the	19	Q. Would he come home drunk? Would he get angry?
20	years?	20	Would he cry? What behaviors did he exhibit that let you
21	A. Things Chris told me and certain things I	21	know he started abusing something again?
22	remember as an acquaintance/friend.	22	A. He would get very depressed and generally I
2:3	Q. Did you see him in AA meetings and things like	23	would get angry at him.
24	that over the years since he had been 18?	24	Q. Would you always know if he had started using
	that over the years since no had occur to:		
	. 31		33
1	A. Yes.	1	something?
2	<ul> <li>Q. Would it be correct to say you were friends for</li> </ul>	2	A. Yes.
.3	a long period of time and then at some point it became	3	Q. That would be because of him acting depressed?
4	romantic and you got married?	4	A. No. It was almost an internal alarm that I
5	A. Yes.	5	can't describe.
6	<ul> <li>Q. Because Chris was previously married during</li> </ul>	- 6	Q. What would you do when you thought he was
7	that time.	7	abusing drugs or alcohol?
8	A. Yes.	8	A. Mostly within two days he was in a psych unit.
9	Q. Did you have a relationship when he was	9	Q. Would you get him admitted or would he admit
10	married?	10	himself?
11	A. No. I mean, a friendship.	11	A. Most of the time he asked me to help him get
12	Q. I understand.	12	in.
13	How old was Chris when he died?	13	Q. How many times during approximately the year
14	A. Thirty-seven.	1.4	and a half of your marriage did he have one of these
15	Q. Between 30 and 37 what was his status in terms	15	binges where he would have to go in and get help?
16	of being either sober or using substances? Maybe this	16	A. I can't even remember the times. I couldn't
17	will be easier. After he got out of jail for the car	17	count without looking at the medical records.
18	accident.	18	Q. Would you see a connection between when he was
19	A. He was sober for a while and relapsed. I'm	19	using these substances and him getting depressed or
20	unsure when. And then he was sober for two years before	20	suicidal?
21	we got married. And then he relapsed after we got	21	A. Ask the question again.
22	married. Like it would be a four-day binge. He didn't	22	Q. Did you see a connection between him having
ı	continuously use, generally.	23	relapsed or used drugs or alcohol and getting depressed
143			
23 24	Q. Was it alcohol?	24	or suicidal?

Γ	34		36
1	A. Not all the time.	1	he tried to kill himself. That's his wait.
2	Q. So he would sometimes get depressed when he was	2	November 2003 was the first hospitalization he had. That
3	not abusing substances?	3	wasn't for suicide.
4	A. Yes.	4	Q. What was it for?
5	Q. Did he talk to you about his problems with	5	A. Depression and drug addiction. I don't think
6	addiction?	6	it was a suicide attempt that got him there.
7	A. Yes.	7	Q. You think he just went in because he started
8	Q. What would he say? Let's say during your	8.	abusing drugs or alcohol?
9	marriage.	9	A. Yes.
10	A. I mean, it was a common topic. We went to	10	Q. Was he living with you at the time of that
11	meetings together. We had AA friends together. So I	11	hospitalization?
12	Q. I know it's a general topic, but I'm trying to	12	A. Yes.
13		1	
ŀ	get a feel. Did it seem like something he was constantly	13	Q. Did you admit him to the hospital or did he do
14	struggling with or something he had relatively under	14	that
15	control most of the time?	15	A. Yes. We went together.
16	A. I don't know how to describe that.	16	Q. What hospital, if you remember?
17	Q. Did it cause friction between you and Chris?	17	A. Rockford.
18	A. When he was using, yes.	18	Q. How long was he in Rockford that time?
19	Q. Is it correct that you kicked him out of the	19	A. Four or five days. I have to look at the
20	house a few times when he was using?	20	record.
21	A. Yes.	21	Q. Was there a suicide attempt in September of
22	Q. Do you remember how many times?	22	2004?
23	A. I want to say twice. I didn't kick him out of	23	A. Yeah. Was that the one with the IV tubing?
24	the house. He knew if he was using, he could not live	24	Q. I'm asking what your recollection is.
	35		37
1	there.	1	A. I'm not good with keeping track of which one.
2	Q. Did you ask him to leave?	2	Q. Tell me about the IV tubing incident.
3	A. Once I know I did. Once I just told him he	3	A. He had been using and staying with that woman
4	couldn't go home if he was going to choose to use.	4	Kathy, and a probation officer I guess came for her
5	Q. The several times he was out of the house	5	because she was on probation. He had a high alcohol
6	because he was using, did he stay with his aunt Helen?	6	content. So they took him to Wilmington - a
7	A. No.	7	breathalyzer. And they took him to Wilmington Hospital,
8	Q. Where did he stay?	8	and while he was in the emergency room, he tried to hang
9	A. Two different friends.	9.	himself with IV tubing and a sheet. And then he was
10	Q. Do you know their names?	10	taken to Rockford.
11	A. No. I know their first names.	11	Q. Were you at the hospital when this happened?
12	Q. What were their first names?	12	A. No.
13	A. One was Kathy and one was — I'm unsure of his	13	Q. When had he last been living with you prior to
14	name. I can see his face, but	14	going into the hospital?
15	Q. How long was he out of the house each of those	15	A. Two or three days.
16	two times that you remember? How long was he out of your	16	Q. He had been out of the house two or three days
17	house?	17	and then this happened?
18	A. Three, four days. Before he went into the	18	A. Yes.
19	hospital again.	19	Q. Before he left home had he been acting
20	Q. You recall that Chris attempted suicide in	20	depressed or unusual?
21	November of 2003?	21	A. Well, he was using drugs, but no. In fact, he
22	A. Yes.	22	was working and going to work.
23	Q. How did that happen?	23	Q. At that point he left home, but you didn't
24	A. Actually, in November of 2003, that's not when	24	think he was a suicide risk. Would that be accurate?
			man in the e deletes like though that of bounds:

10 (Pages 34 to 37)

	38		40
1	No. I always knew Chris was a suicide risk.	1	mentioned?
2	Q. What do you mean you always knew?	2	A. Yes.
3	A. I knew that Chris had mental health issues and	3	Q. Do you know if he was taking them at that
4	I knew that his mental health issues made him a suicide	4	point?
5	risk.	5	A. Yes.
6	Q. In your opinion, at any point he was a suicide	6	Q. When Chris lived with you, did he seem to be
7	risk?	7	compliant with taking his medications?
8	A. No. I knew if he was cared for when he was in	8	A. Yes.
9	that in those critical moments, that he would be okay.	9	Q. In your written interrogatory answers, and this
10	When he was in Wilmington Hospital and they told me about	10	is question 2(d), you wrote or through your attorney you
11	the IV tubing, I knew he would be okay because they would	11	wrote, "Decedent," meaning Chris, "tried to overdose on
12	keep him safe, Rockford would keep him safe.	12	an illegal drug to kill himself. He made a statement to
13	Q. But he hung himself or he tried to hang himself	13	Plaintiff, Karen Barkes, that two people were dead
14	in Wilmington Hospital when he was in the hospital,	14	because of his mistake. When he became unconscious,
15	correct?	15	Karen Barkes called 911. The police and ambulance
16	A. Yes. Under the probation officer's watch.	16	revived him and took him to the hospital."
17	Q. So you knew who was in the room at the time	17	There isn't a date provided for that one.
18	are you saying a probation officer was in the room at the	18	Do you recall when that was?
19	time?	19	A. No.
20	A. No. He had left the room.	20	Q. You have no recollection?
21	Q. And he was in an emergency room department?	21	A. No.
22	A. Yes. But they were watching him and that's how	22	Q. Do you recall the incident?
23	he didn't die.	23	A. Yes.
24	Q. How do you know who was watching him at what	24	Q. Can you tell me a little more about the
	39		41
1	point?	1	incident? It sounds like he was home with you at the
2		į J.	HIGHERT: It Sounds like he was nome with you at the
1 4	·	2	time?
l	A. Because the nurses walked in and found him	1	
3	A. Because the nurses walked in and found him trying to hang himself.	2	time?
3 4	A. Because the nurses walked in and found him trying to hang himself.     Q. Obviously nobody was in the room with him when	2 3	time?  A. Yes. He came home. And he had told me that
3	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried —</li> </ul>	2 3 4	time?  A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and
3 4 5	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried —</li> <li>A. But they were checking him.</li> </ul>	2 3 4 5	time?  A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had
3 4 5 6 7	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried —</li> <li>A. But they were checking him.</li> <li>Q. Were you aware that anybody was in the room</li> </ul>	2 3 4 5 6	time?  A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he
3 4 5 6	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried —</li> <li>A. But they were checking him.</li> <li>Q. Were you aware that anybody was in the room with him when he tried to make the attempt?</li> </ul>	2 3 4 5 6 7	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told — he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I
3 4 5 6 7 8	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried —</li> <li>A. But they were checking him.</li> <li>Q. Were you aware that anybody was in the room</li> </ul>	2 3 4 5 6 7 8	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.
3 4 5 6 7 8 9	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried —</li> <li>A. But they were checking him.</li> <li>Q. Were you aware that anybody was in the room with him when he tried to make the attempt?</li> <li>A. No. They walked in when he was trying to hang</li> </ul>	2 3 4 5 6 7 8 9	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?
3 4 5 6 7 8 9	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried —</li> <li>A. But they were checking him.</li> <li>Q. Were you aware that anybody was in the room with him when he tried to make the attempt?</li> <li>A. No. They walked in when he was trying to hang himself.</li> </ul>	2 3 4 5 6 7 8 9	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I
3 4 5 6 7 8 9 10	A. Because the nurses walked in and found him trying to hang himself.  Q. Obviously nobody was in the room with him when he actually tried —  A. But they were checking him.  Q. Were you aware that anybody was in the room with him when he tried to make the attempt?  A. No. They walked in when he was trying to hang himself.  Q. Where did you get the information about who was	2 3 4 5 6 7 8 9 10	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I remember there were Christmas lights out.
3 4 5 6 7 8 9 10 11 12	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried — <ul> <li>A. But they were checking him.</li> <li>Q. Were you aware that anybody was in the room with him when he tried to make the attempt?</li> <li>A. No. They walked in when he was trying to hang himself.</li> <li>Q. Where did you get the information about who was in the room when?</li> </ul> </li> </ul>	2 3 4 5 6 7 8 9 10 11 12	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I remember there were Christmas lights out.  Q. Do you know what drug he was using?
3 4 5 6 7 8 9 10 11 12 13	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried —</li> <li>A. But they were checking him.</li> <li>Q. Were you aware that anybody was in the room with him when he tried to make the attempt?</li> <li>A. No. They walked in when he was trying to hang himself.</li> <li>Q. Where did you get the information about who was in the room when?</li> <li>A. The nurse, Chris, the medical records, the people at Rockford.</li> </ul>	2 3 4 5 6 7 8 9 10 11 12 13	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I remember there were Christmas lights out.  Q. Do you know what drug he was using?  A. They had said heroin.
3 4 5 6 7 8 9 10 11 12 13	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried — <ul> <li>A. But they were checking him.</li> <li>Q. Were you aware that anybody was in the room with him when he tried to make the attempt?</li> <li>A. No. They walked in when he was trying to hang himself.</li> <li>Q. Where did you get the information about who was in the room when?</li> <li>A. The nurse, Chris, the medical records, the</li> </ul> </li> </ul>	2 3 4 5 6 7 8 9 10 11 12 13 14	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I remember there were Christmas lights out.  Q. Do you know what drug he was using?  A. They had said heroin.  Q. Do you recall him becoming unconscious and you
3 4 5 6 7 8 9 10 11 12 13 14 15	A. Because the nurses walked in and found him trying to hang himself.  Q. Obviously nobody was in the room with him when he actually tried —  A. But they were checking him.  Q. Were you aware that anybody was in the room with him when he tried to make the attempt?  A. No. They walked in when he was trying to hang himself.  Q. Where did you get the information about who was in the room when?  A. The nurse, Chris, the medical records, the people at Rockford.  Q. These are things that people told you after the	2 3 4 5 6 7 8 9 10 11 12 13 14 15	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I remember there were Christmas lights out.  Q. Do you know what drug he was using?  A. They had said heroin.  Q. Do you recall him becoming unconscious and you called 911?
3 4 5 6 7 8 9 10 11 12 13 14 15 16	<ul> <li>A. Because the nurses walked in and found him trying to hang himself.</li> <li>Q. Obviously nobody was in the room with him when he actually tried — <ul> <li>A. But they were checking him.</li> <li>Q. Were you aware that anybody was in the room with him when he tried to make the attempt?</li> <li>A. No. They walked in when he was trying to hang himself.</li> <li>Q. Where did you get the information about who was in the room when?</li> <li>A. The nurse, Chris, the medical records, the people at Rockford.</li> <li>Q. These are things that people told you after the incident?</li> </ul> </li> </ul>	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I remember there were Christmas lights out.  Q. Do you know what drug he was using?  A. They had said heroin.  Q. Do you recall him becoming unconscious and you called 911?  A. Yes.
3 4 5 6 7 8 9 10 11 12 13 14 15 16	A. Because the nurses walked in and found him trying to hang himself.  Q. Obviously nobody was in the room with him when he actually tried —  A. But they were checking him.  Q. Were you aware that anybody was in the room with him when he tried to make the attempt?  A. No. They walked in when he was trying to hang himself.  Q. Where did you get the information about who was in the room when?  A. The nurse, Chris, the medical records, the people at Rockford.  Q. These are things that people told you after the incident?  A. Uh-huh.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I remember there were Christmas lights out.  Q. Do you know what drug he was using?  A. They had said heroin.  Q. Do you recall him becoming unconscious and you called 911?  A. Yes.  Q. Where did he go that time for treatment?
3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	A. Because the nurses walked in and found him trying to hang himself.  Q. Obviously nobody was in the room with him when he actually tried —  A. But they were checking him.  Q. Were you aware that anybody was in the room with him when he tried to make the attempt?  A. No. They walked in when he was trying to hang himself.  Q. Where did you get the information about who was in the room when?  A. The nurse, Chris, the medical records, the people at Rockford.  Q. These are things that people told you after the incident?  A. Uh-huh.  MR. MARTIN: Yes?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I remember there were Christmas lights out.  Q. Do you know what drug he was using?  A. They had said heroin.  Q. Do you recall him becoming unconscious and you called 911?  A. Yes.  Q. Where did he go that time for treatment?  A. Wilmington Hospital.
3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	A. Because the nurses walked in and found him trying to hang himself.  Q. Obviously nobody was in the room with him when he actually tried —  A. But they were checking him.  Q. Were you aware that anybody was in the room with him when he tried to make the attempt?  A. No. They walked in when he was trying to hang himself.  Q. Where did you get the information about who was in the room when?  A. The nurse, Chris, the medical records, the people at Rockford.  Q. These are things that people told you after the incident?  A. Uh-huh.  MR. MARTIN: Yes?  THE WITNESS: Yes.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	A. Yes. He came home. And he had told me that I had known that he had been struggling with guilt and trying to figure out a way to deal with that. And he had told he was despondent and said he wanted to die, he was tired of feeling guilty. And I was angry because I knew that he had been using.  Q. At some point he became unconscious?  A. Yeah. It was at Christmas time, because I remember there were Christmas lights out.  Q. Do you know what drug he was using?  A. They had said heroin.  Q. Do you recall him becoming unconscious and you called 911?  A. Yes.  Q. Where did he go that time for treatment?  A. Wilmington Hospital.  Q. Did he go into a drug program after Wilmington
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	42		44
1	were married?	1	Q. Did his problems seem to be getting worse or
2	A. Most of the time Dr. Bercaw?	2	did they just flare up occasionally?
3	Q. Dr.?	3	A. Flare up occasionally.
4	A. Bercaw.	4	Q. It wasn't like a progression of getting worse?
5	Q. Do you know how to spell that?	5	A. No.
6		6	Q. How would it affect you when he would abuse
7		7	alcohol or drugs? I know you said you would get angry,
8	<ul><li>Q. Do you know the doctor's first name?</li><li>A. No.</li></ul>	8	but how did it affect you at home?
9		9	A. Psychologically I think, because of my
10	<ul><li>Q. Was he with a certain practice group?</li><li>A. I don't know.</li></ul>	10	knowledge, I understood that it wasn't personal and that
11	Q. Was he your doctor?	11	it didn't have to do with me and that I could be
12	A. No.	12	supportive of him when he chose to get sober again.
13		13	Q. Did it make you angry that you could stay in
14		14	recovery and he couldn't?
15		15	A. No.
16	<ul><li>Q. How do you spell that?</li><li>A. D-e-p-h-e-r.</li></ul>	16	Q. Did Chris have a friend named Scott Herr?
1	•	17	
17		18	
18	A. D-e-p I'm unsure.	19	Q. Is that one of the two people that you couldn't remember the name of?
19	Q. What's the first name of Dr. Depfer?	20	A. No.
20	A. Charles. I have only been going to him since I	21	
21	was 13.	1	•
22	MR. MARTIN: Off the record.	22	A. He was somebody who had just started getting
23	(Discussion off the record.)	23	sober and that Chris and him were friends and would go
24		24	have coffee together and go to meetings together.
	43		45
1	BY MS. BALLARD:	1	Q. Do you know where he lives?
2	Q. Tell me about Aunt Helen. Is this a family	2	A. He lives in Claymont, but he's moving next
3	member that Chris was especially close to?	3	week.
4	A. Yes. She is his father's sister.	. 4	Q. Do you still keep in touch with him?
5	Q. Do you know why she's the one who he chose to	5	A. Yes.
6	go live with in November 2004?	6	Q. Did he help Chris with any recovery issues?
7	A. When he was a teenager and having problems in	7	A. Yes. Just being able to talk and have a
8	California, he had come to live with Helen and Helen's	8	friend.
9	husband.	9	Q. What's Chris's mother's name?
10	Q. Is Helen's husband named Tom, by any chance?	10	A. Dorothy.
11	A. Yes.	11	Q. Dorothy Barkes?
12	Q. There was an Uncle Tom and I didn't know who	12	A. Yes. They call her Dottie.
13	that was.	13	Q. Where does she live?
14	A. He has died.	14	A. California.
15	Q. He died?	15	Q. Do you keep in touch with her?
16	A. Yes. But he was in AA and so they took Chris	16	A. I tell her – I e-mail his family with stuff
17	under their wing.	17	that's going on with the court and general information,
18	Q. Was Helen in AA, to your knowledge?	18	but no.
19	A. No.	19	Q. Was Chris close to her during your marriage?
20	Q. During your marriage in 2003 to 2004, would you	20	A. No.
21	say that Chris had more problems or that the problems	21	Q. How about Chris's father, what's his name?
22	increased with him abusing substances during your	22	A. Raymond.
23	marriage?	23	Q. Does he live in California, also?
24	A. I don't understand the question.	24	A. Yes.
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<sup>12 (</sup>Pages 42 to 45)

1	46		48
1	Q. Do you keep in touch with him?	1	A. Yes.
2	A. Other than to e-mail.	2	Q. When you were married, did he seem
3	Q. Same sort of things with his mother?	3	knowledgeable about medical issues?
4	A. Yes.	4	A. Yes.
5	Q. Was Chris close to him when you were married?	5	Q. You seem pretty emphatic about that. Would he
6	A. Not really. They would talk on the phone once	6	talk about medical issues a lot?
7	a month.	7	A. He always knew the questions on Jeopardy. If
8	Q. As far as you can recall, can you give me	8	somebody was sick he wouldn't offer advice, but he
9	Chris's job history? Was he working for Pepsi at the	9	would know what they were talking about. My father came
10	time he died?	10	up with some weird kind of leukemia and he knew what
11	A. Yes.	11	was
12	Q. How long did he work for Pepsi? You can either	12	MR. MARTIN: Can we take a short break?
13	take it forward or backward, whatever is easier.	13	MS. BALLARD: Sure.
14	A. We can go backwards. I want to say that he	14	(A recess was taken.)
15	started the beginning of summer.	15	BY MS. BALLARD:
16	Q. Summer of '04?	16	Q. We were talking about Chris having been an RN
17	MR. MARTIN: Yes?	17	and you said he seemed knowledgeable about medical
18	THE WITNESS: Yes.	18	issues. Did Chris seem to be insightful into his own
1	BY MS. BALLARD:	19	addiction issues?
19		20	A. Yes.
20	Q. What other jobs did he have before that?	21	O. I know it's a general question, but what sort
21	A. He worked at Big Sky Bakery as a baker. He		
22	worked at Grotto's Pizza. And then he was incarcerated.	22	of things would be say about his own addiction issues?
23	Q. That was approximately '97 to '99?	23	A. I mean, he knew that, if he used, he would be
24	A. Yes. He worked — he started working at	24	out of control. Not out of control like he would keep
	47		49
1	Grotto's when he was in work release.	1	using.
· 2	Q. Was he a cook?	.2	Q. Did he seem to have insight into other mental
	A. Yes. Pizza maker. Before that I'm unclear.	Į.	
3	A. 165. Fizza maker. Derote mat 111 unctear.	3	health issues like depression and bipolar?
3 4	He worked at Leader Nursing Homes. He worked at	3 4	health issues like depression and bipolar?  A. Not as much.
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50 1 Q. When you say "the hospital," do you mean 2 Rockford? 3 A. Yes. And I was trying to get him to stay in 4 the house and he wanted to leave, and he wound up 5 slapping me, which then I opened — I called 911 because 6 I figured the police would help me try to get him in the 1 hospital. 8 Q. Did they take him to the hospital? 9 A. I'm unsure what happened that time. I don't 1 a. Offensive touching. I told them I didn't want 1 to press charges because I knew with his record it 1 to wouldn't be a but they said in order to take 1 him, they have to charge him with? 1 A. Offensive touching. I told them I didn't want 1 to press charges because I knew with his record it 1 to wouldn't be a but they said in order to take 1 that charge at some poin? 1 A. Yea. I think. 1 Q. Did you have to testify? 2 Q. Were there other occasions where you would 1 fight or argue with Claris and it became physical, other 1 than they could help. 2 A. Yeah. I think. 2 Q. Did you have to testify? 3 A. Ordensive touching. I told them I didn't want 4 to press charges because I knew with his record it 5 that charge at some poin? 5 A. Yeah. I think. 6 Q. Did you have to testify? 6 A. No. There were times that I was trying to 6 restrain him to the pan, you didn't bit him? 6 A. No. I want to sup that he pled. I'm unsure 6 because I'm not with the court — 7 Q. That's all right. 2 A. No. I want to sup that he pled. I'm unsure 2 because I'm not with the court — 9 C. A. Wes there another domestic incident where he 9 throw a phone at you in January of 2004? 5 A. Yes. He threw the phone and it hit me. He 9 wan't atming it at me. 9 Q. Alcohol, do you recall? 1 A. No. 1 Q. Did he find them not to be helpful? Is there a 1 creasion he didn't continually get counseling?  5 A. On and off. He tried different places, Open 1 Door, PSI. 2 Door, PSI. 3 A. On and off. He tried different places, Open 2 Door, PSI. 3 A. On and off. He tried different places, Open 3 A. A. On and off. He tried different places, Open 3 A. A. On and off. He tried different places, Open			1	
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the house and he wanted to leave, and he wound up slapping me, which then I opened — I called 911 because I figured the police would help me try to get him in the hospital. Q. Did they take him to the hospital? A. The unsure what happened that time. I don't really — I know that's when they said in order to take him, they have to charge him with that. Q. Charge him with? A. Offensive touching. I told them I didn't want to press charges because I knew with his record it wouldn't be— but they said that that's the only way that they could help. Q. Are you aware that he entered a guilty plea to that that carge at some point? A. No. I want to say that he pled. I'm unsure because I'm not with the court — Q. Thaf's all right. Q. Did you have to testify? A. But I remember that he said, "TII just plead  To Q. How did that incident start? A. No. Q. You were arguing, I guess? A. A. No. Q. You were arguing, I guess	2	Rockford?	2	And I'd say, "You know I'd know when you
5   slapping me, which then I opened — I called 911 because I figured the police would help me try to get him in the hospital.   8   Q. Did they take him to the hospital?   9   A. I'm unsure what happened that time. I don't real! — I know that's when they said in order to take him, they have to charge him with that.   10   Q. So would try to restrain him.   10   Q. So would try to restrain him.   10   Q. So would try to restrain him.   10   Q. Were there other occasions where you would fight or argue with Chris and it became physical, other that they could help.   14   A. No.   16   Q. Did you dring either of these incidents hit or strike Chris?   A. No. O. Were there other occasions where you would fight or argue with Chris and it became physical, other that the tropess charges because I knew with his record it wouldn't be — but they said that that's the only way that they could help.   16   A. No. There were times that I was trying to that charge at some point?   17   Q. Are you aware that he entered a guilty plea to that charge at some point?   18   Q. Did you have to testify?   20   A. No. There were times that I was trying to restrain him to keep him from leaving the bouse but, no.   16   Q. Did you consider Chris to be verbally abusive towards you at any point?   18   Q. Did you consider Chris to be verbally abusive towards you at any point?   20   A. No.   Q. Did you consider Chris to be verbally abusive towards you at any point?   21   A. No. I was the reanother domestic incident where he threw a phone at you in January of 2004?   22   A. But I remember that he said, "I'll just plead   23   A. On and off. He tried different places, Open   24   Door, PSI.   3   A. On and off. He tried different places, Open   25   A. Different reasons, different places, Some not helpfully some — Chris, knew — he was knowledgeable enough to know about addiction. He didn't understand that.   24   25   A. Yes.   25   A. Yes.   26   A. Yes.   27   A. Yes.   28   A. Yes.   29   A. Yes.   29   A. Yes.   29   A. Yes.   29   A	3	The state of the s	3	are using."
6 Ifigured the police would help me try to get him in the hospital. 8 Q. Did they take him to the hospital? 9 A. I'm unsure what happened that time. I don't really – I know that's when they said in order to take him, they have to charge him with that. 10 really – I know that's when they said in order to take him, they have to charge him with? 11 A. Offensive touching. I told them I didn't want to press charges because I knew with his record it wouldn't be – but they said that that's the only way that they could help. 10 Q. Are you aware that he entered a guilty plea to that charge at some point? 11 A. No. There were times that I was trying to restrain him to keep him from leaving the house but, no. 12 Q. Did you have to testify? 13 A. Yeah. I think. 14 Q. Are you aware that he entered a guilty plea to that charge at some point? 15 A. No. I want to say that he pled. I'm unsure because I'm not with the court – 16 A. But I remember that he said, "I'll just plead  17 guilty and then do the six months' probation." That's what I generally remember. 18 Q. How did that incident start? 19 A. Yes. He had started using again. 10 Q. You during either of these incidents hit or strick Chris? 11 A. No. 12 Q. Were there other occasions where you would fight or argue with Chris and it became physical, other than the two you described? 14 A. No. 15 Q. Were there other occasions where you would fight or argue with Chris and it became physical, other than the two you described? 16 A. No. There were times that I was trying to restrain him to keep him from leaving the house but, no. 16 Q. Did you have to testify? 20 Q. Did you consider Chris to be verbally abusive towards you at any point? 21 A. No. I want to say that he pled. I'm unsure because I'm not with the court – 22 because I'm not with the court – 23 Q. That's all right. 24 A. But I remember that he said, "I'll just plead  25 Q. How did then do the six months' probation." That's what I generally remember. 26 Q. How did that incident start? 27 Q. How did that incident start?	4	the house and he wanted to leave, and he wound up	4	So generally it would be a moot point. I
7	5	slapping me, which then I opened I called 911 because	5	might bring it up because I was frustrated, but I
8	6	I figured the police would help me try to get him in the	6	wouldn't beat a dead horse. We both know he was.
A l'm unsure what happened that time. I don't really – I know that's when they said in order to take him, they have to charge him with?  Q. Charge him with?  A. Offensive touching. I told them I didn't want to press charges because I knew with his record it wouldn't be – but they said that that's the only way that they could help.  Q. Are you aware that he entered a guilty plea to that they could help.  Q. Are you aware that he entered a guilty plea to that they could help.  Q. Did you have to testify?  A. No. I want to say that he pied. I'm unsure because I'm not with the court –  Q. Did you have to testify?  A. No. I want to say that he pied. I'm unsure because I'm not with the court –  Q. That's all right.  A. But I remember that he said, "I'll just plead  That's what I generally remember.  Q. Was there another domestic incident where he threw a phone at you in January of 2004?  A. No.  A. No. The were times that I was trying to restrain him to keep him from leaving the house but, no. Would he hit me? No.  Q. Did you have to testify?  A. No. I want to say that he pied. I'm unsure because I'm not with the court –  Q. That's all right.  J. guilty and then do the six months' probation." That's what I generally remember.  Q. Was there another domestic incident where he wasn't aiming it at me.  Q. How did that incident start?  A. He had started using again.  Q. Alcohol, do you recall?  A. No. It's all he same to me.  Q. You don't recall?  A. No. It's all the same to me.  Q. You were arguing, I guess?  A. Yes, Can you tell me how it came about?  A. Generally on pharmacy was Target or Shop Rite.  When he agreed to the bipolar medications, we got them argument, "Chris, are you using again?"  "No, I'm not."  A. Yes, Underwently the following the house but, no.  Would he hit me? No.  Q. Did you described?  A. No.  13 Q. Did you described?  A. On and off. He tried different places, Open Door, PSI.  A. On and off. He tried different places, Open Door, PSI.  A. On the find them not to be helpful? Is there a reason he did	7	hospital.	7	Q. Did you during either of these incidents hit or
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12 Q. Charge him with?  A. Offensive touching. I told them I didn't want to press charges because I knew with his record it wouldn't be — but they said that that's the only way that they could help.  16 that charge at some point?  17 Q. Are you aware that he entered a guilty plea to that charge at some point?  18 A. Yeah. I think.  20 Q. Did you have to testify?  21 A. No. I want to say that he pled. I'm unsure because I'm not with the court —  22 because I'm not with the court —  23 Q. That's all right.  24 A. But I remember that he said, "PII just plead  51 guilty and then do the six months' probation." That's what I generally remember.  3 Q. Was there another domestic incident where he threw a phone at you in January of 2004?  4 A. He had started using again.  9 Q. Alcohol, do you recall?  10 A. No.  11 Q. You don't recall?  12 Q. Were there other occasions where you would fight or argue with Chris and it became physical, other than the two you described?  A. No. There were times that I was trying to restrain him to keep him from leaving the house but, no.  Would he hit me? No.  Q. Did you consider Chris to be verbally abusive towards you at any point?  A. No.  Q. You've described several incidents of depression or a suicide attempt in 2003-2004. When Chris wasn't actively depressed, was he getting outpatient counseling, mental health counseling?  51 A. On and off. He tried different places, Open Door, PSI.  3 Q. Did he find them not to be helpful? Is there a reason he didn't continually get counseling?  A. He had started using again.  9 Q. Alcohol, do you recall?  10 A. No.  11 Q. You don't recall?  12 A. No. It's all the same to me.  13 Q. You were arguing, I guess?  4 A. Yes.  14 A. Yes.  15 Q. Can you tell me how it came about?  A. Generally our pharmacy was Target or Shop Rite.  When he agreed to the bipolar medications, we got them through Medco.  P. Were there outher two you described?  A. No. There were times that I was trying to restrain him to keep him from leaving the house but, no.  Would hit be	10	really - I know that's when they said in order to take	10	Q. So would that be a no, you didn't hit him?
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20 Q. You said, "when he agreed to the bipolar." Was	l			·
lander to the state of the stat	1		l	
21 say lie to you, but he wouldn't admit it at first and you 21 that a diagnosis that came somewhat later? I'm not sure			ļ	_
22 would have to have a discussion with him and get him to 22 what you meant by that.	i	_	l	•
23 admit he was using? 23 A. Chris knew about medical things, but it was		-	1	
A. I'm replaying. He would know when he would 24 hard for him to understand the mental health problems,	24	A. I'm replaying. He would know when he would	24	hard for him to understand the mental health problems,

	Karen 5.		
	54		56
1	and he wasn't sure what was wrong with him, and so when	1	every weekend?
2	the bipolar he knew he was depressed, but he wasn't	2	A. Every other weekend.
3	sure about the bipolar until I guess one of the	3	Q. What are his children's names?
4	hospitalizations when they started him on the Effexor,	4	A. Brittany and Allie. Alexandria. They call her
5	Depakote.	5	Allie.
6	Q. Do you remember when that diagnosis of bipolar	6	Q. How old are they now?
7	was made?	7	A. Brittany's 18. Al would be 15.
8	A. No. I guess they thought about it after he	8	MR. MARTIN: Let's go off the record.
9	went on the manic episode with the Zoloft. A	9	(Discussion off the record.)
10	psychologist had mentioned to me a friend of mine had	10	BY MS. BALLARD:
11	mentioned to me that that was a possibility.	11	Q. So Allie's about 15?
12	Q. When he started taking the meds for bipolar,	12	A. Yes.
13	did it seem to help?	13	Q. Do you recall Chris having trouble making his
14	A. Yes.	14	child support payments when he was married to you?
15	Q. Tina Grossman, she was Chris's first wife?	15	A. No. He was in arrears because of being in
16	A. Yes.	16	jail. She started the child support while he was in
17	Q. What was your relationship like with Tina	17	jail. So every time that he - it was part of the thing
18	during your marriage to Chris?	18	that he would pay off some of the arrears every he was
19	A. Tina and I had been friends for a long time,	19	out of a job for a little while, but he didn't stop he
20	but we didn't see eye to eye on certain things. It was	20	didn't go and ask for the child support to be stopped.
21	the normal ex-wife-new wife relationship.	21	He knew that it would collect and he would pay.
22	Q. Was it things that had to do with Chris and the	22	Q. How would you describe Chris's relationship
23	kids or other sort of things?	23	with his daughters when he was married to you?
24	A. No. It was more on her opinion about my	24	A. They were close. They talked on the phone
	55		57
1	behavior.	1	every day.
2	Q. Did she disapprove in some way of your	2	Q. Did his daughters get along with you?
3	behavior?	3	A. Yeah.
4	A. No. But we're different people. Her and I are	4	Q. Are you familiar with a Dr. Joshi?
5	different people.	5	A. Yacoub.
6	Q. You mentioned something about her opinion of	6	Q. What is it?
7	your behavior, so you must have had something in mind.	7	A. Yacoub?
8	I'm trying to find out what that is. I'm not saying it	8	Q. I believe it's J-o-s-h-i.
9	was valid or not. I just want to know what her opinion	9	A. Oh, no.
10	was.	10	Q. What was the one you were going to mention or
11	A. I don't know how to describe it.	11	trying to mention?
12	Q. Sounds like there was some conflict between you	12	A. There was a Yacoub. He was the Rockford
13	and Tina.	13	doctor.
14	A. Yes.	14	Q. I think there was a Jackson at Rockford. I
15	Q. What was the conflict over?	15	haven't heard of that one.
16	A. It seemed like anything I did. Driving down	16	A. Jacobson.
17	the street, not waving.	17	Q. Was there a psychiatrist that you at some point
18	Q. Did it have anything to do with Chris's	18	contemplated bringing a legal claim against? Not in
19	recovery and substance abuse issues?	19	connection with this suicide, something else.
20	A. No.	20	A. Me personally?
21	Q. Did Chris get along with her when he was	21	Q. You and/or Chris. Based on treatment. Based
22	married to you?	22	on his treatment of Chris.
23	A. Chris knew how to deal with her better.	23	A. I was angry with the psychiatrist that was
		1	
24	Q. I think you said his children would come over	24	treating Chris.

	58		60
1	Q. Which psychiatrist is that?	1	A. No.
2	A. Privett.	2	MS. BALLARD: I'm going to mark a document
3	Q. Privett?	3	Barkes 1.
4	A. Dr. Privett.	4	(Barkes Deposition Exhibit No. 1 was marked
5	Q. Where was he?	5	for identification.)
6	A. She was at the Kalkstein Associates.	6	BY MS. BALLARD:
7	Q. When I'm sorry. Go ahead.	7	Q. I'll give you a couple minutes to flip through
8	A. They wouldn't give me his records after he	8	that. I just have some specific questions.
9	died.	9	For the record, this is a record of
10	Q. I was talking about something before he died.	10	Catholic Charities, Inc., Counseling and Substance Abuse
11	I saw that in the records. So there wasn't another	11	Services, interview date for Christopher Barkes,
12	doctor who treated Chris that you contemplated bringing a	12	12/18/2003.
13	claim against for his treatment of Chris prior to the	13	You're welcome to read the whole thing, but
14	suicide?	14	I have some specific questions. Just let me know when
15	A. Not that I can think of.	15	you're ready.
16	Q. You're not familiar with this Dr. Joshi?	16	Were you aware that Chris had sought
17	A. No.	17	counseling with Catholic Charities in December 2003?
18	Q. Have you ever filed a lawsuit before this one?	18	A. Yes.
19	A. No.	19	Q. On this document on the front page after the
20	Q. Did you receive counseling at Delaware Family	20	initial paragraph, is it correct that it says,
21	Center in 2001 through at least 2002?	21	"Presenting Problems as Seen by Client"?
22	A. Yes.	22	A. On the first page?
23	Q. Who was your counselor there?	23	Q. Yes.
24	A. Jane Anderson.	24	A. Oh, I see. Yes.
	59		61
1	Q. Are you still seeing Jane Anderson?	1.	Q. At the bottom of the last paragraph on that
2	A. I'm in a women's group that she facilitates.	2	page, it says, "Reason for securing services at this
3	Q. I have some notes here that are from '01 to	3	time," and among other reasons, is it correct it says,
4	'02. Do you recall the last time you actually treated at	4	"Marital conflict"?
5	Delaware Family Center?	5	A. Yes.
6	A. It would have been after Chris died.	6	Q. Do you know what Chris may have been referring
7	Q. In 2002, this is actually 7/17/02, Dr. Anderson	7	to as marital conflict at that point?
8	wrote in her notes that you said, "I'm afraid I'll take	8	A. At that point we were arguing because he was
9	my issues out on him," meaning Chris.	9	drinking.
10	Do you recall what you meant by that? This	10	Q. Anything else?
11	is before you were married. This is 2002.	11	A. No.
12	A. Not out of context, no.	12	Q. Also on that first page it says, "Drug of
13	Q. What she wrote that time was "Karen and Chris,	13	choice is alcohol."
14	K unused to being alone. 'I'm afraid I'll take my issues	14	A. Yes.
15	out on him."	15	Q. Under "Frequency." Would you agree with that,
16	Does that help?	16	that that was his drug of choice?
17	A. Before we got married, we had met with Jane to	17	A. Yes. It was hard to say because I never I
18	just talk about couples issues. I had been single and	18	mean, I never drank with him, I never used drugs with
19	had lived alone and used to that. I had been on my own	19	him.
20	for a long time. So I was used to that. And I was	20	Q. I understand, but when he had these relapses,
21	afraid that I would be a bad wife, like I didn't want to	21	would it typically be alcohol? Would you smell alcohol?
22	be a bad wife to him.	22	A. Yes. But he did drugs, too.
23	Q. Did it have anything to do with recovery issues	23	Q. Would you turn to page 5 of the document?
	The state of the s		
24	or anything like that?	24	After the list of his friends and family, there's a

16 (Pages 58 to 61)

			C.A.
	62		64
1	paragraph there and the last sentence says, "According to	1	Q. The therapist indicated at this time that
2	Mr. Barkes, he has experienced serious problems in the	2	Christopher had no suicidal intent, suicidal intent,
3	past 30 days with his: sexual partner/spouse."	3	none? It's the middle of the page.
4	Do you know what problems he would have	4	A. Yes. Yes, I see it. Your question about it?
5	been referring to at that time?	5	Q. I was asking if the document said that, but if
6	A. Me arguing about his drinking or using drugs.	6	you want to elaborate on your observations of Chris at
7	Q. No other problems?	7	that time, that's fine, too. This is December 2003.
8	A. No.	8	A. Uh-huh. And your question would be?
9	Q. A little further down that same page,	9	Q. My question was just if that's what the
10	"Mr. Barkes reported being abused in the past 30 days:	10	therapist indicated, that he had no suicidal intent at
11	emotionally by his sexual partner or spouse."	1.1	this time. But it seemed like you may have wanted to add
12	Do you have any idea what he's referring to	12	to the answer.
13	there?	13	A. No. That's what the person put.
14	A. Me being mad about him drinking.	14	Q. That's all I have with that. Let me get this
15	Q. Do you know why he would have considered that	15	one marked as Barkes 2.
16	emotional abuse?	16	(Barkes Deposition Exhibit No. 2 was marked
17	A. No.	17	for identification.)
18	Q. If you can turn to page 6. The first full	18	BY MS. BALLARD:
19	paragraph on that same page, I'll just read it into the	19	Q. For the record, this is an assessment form from
20	record. "Client stressed that his wife has been sober	20	Christiana Care with what appears to be an admit date of
21	for last 18 years. As per client, despite	21	11/25/03, and it's been produced by plaintiffs as P 659.
22	marital conflict he is satisfied with being	22	Let me know when you're ready.
23	married. However, his wife is verbally abusing	23	In the middle of this "History of
24	him by putting him down and bringing back	24	Presenting Problem" paragraph, the provider wrote: "Came
1	63		65
1		1	
1 2	traumatic past as it relate to his vehicular	1 2	home on Zoloft, 100," I'm not sure what the dosage is
2	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and	2	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed
2	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things	2	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to
2 3 4	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."	2 3 4	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."
2 3 4 5	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."  What was he referring to by telling the	2	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."  Was this the incident you told me about
2 3 4 5 6	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."  What was he referring to by telling the therapist you were verbally abusing him about his past	2 3 4 5	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."
2 3 4 5 6 7	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."  What was he referring to by telling the therapist you were verbally abusing him about his past and in particular the accident?	2 3 4 5 6	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."  Was this the incident you told me about where he was taking Zoloft and then tried to take alcohol to come down from that?
2 3 4 5 6 7 8	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."  What was he referring to by telling the therapist you were verbally abusing him about his past and in particular the accident?  A. I knew that, if Chris was to stay sober, he had	2 3 4 5 6 7	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."  Was this the incident you told me about where he was taking Zoloft and then tried to take alcohol
2 3 4 5 6 7	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."  What was he referring to by telling the therapist you were verbally abusing him about his past and in particular the accident?  A. I knew that, if Chris was to stay sober, he had to deal with that accident and the guilt, and I would	2 3 4 5 6 7 8	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."  Was this the incident you told me about where he was taking Zoloft and then tried to take alcohol to come down from that?  A. Yes.
2 3 4 5 6 7 8 9 10	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."  What was he referring to by telling the therapist you were verbally abusing him about his past and in particular the accident?  A. I knew that, if Chris was to stay sober, he had to deal with that accident and the guilt, and I would bring it up, that he had to deal with it.	2 3 4 5 6 7 8 9	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."  Was this the incident you told me about where he was taking Zoloft and then tried to take alcohol to come down from that?  A. Yes.  Q. According to this, it appears that he went to
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2 3 4 5 6 7 8 9 10 11 12 13	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."  What was he referring to by telling the therapist you were verbally abusing him about his past and in particular the accident?  A. I knew that, if Chris was to stay sober, he had to deal with that accident and the guilt, and I would bring it up, that he had to deal with it.  Q. What kind of things would you say to him?  A. That the guilt was eating him up inside and that he had to find some way to deal with that. And I	2 3 4 5 6 7 8 9 10 11 12 13	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."  Was this the incident you told me about where he was taking Zoloft and then tried to take alcohol to come down from that?  A. Yes.  Q. According to this, it appears that he went to his aunt's after you kicked him out of the house? Do you agree with that?  A. No.  Q. Which part do you not agree with?
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2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."  What was he referring to by telling the therapist you were verbally abusing him about his past and in particular the accident?  A. I knew that, if Chris was to stay sober, he had to deal with that accident and the guilt, and I would bring it up, that he had to deal with it.  Q. What kind of things would you say to him?  A. That the guilt was eating him up inside and that he had to find some way to deal with that. And I didn't know how.  Q. Did you get the feeling when you would bring that subject up with him, that he would feel depressed?  A. I knew that he felt guilty. I knew it would make him — I knew that it made him feel worse, but I knew that denying it and pretending like it didn't happen was making things worse.  Q. One last question on this one. On page 7	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."  Was this the incident you told me about where he was taking Zoloft and then tried to take alcohol to come down from that?  A. Yes.  Q. According to this, it appears that he went to his aunt's after you kicked him out of the house? Do you agree with that?  A. No.  Q. Which part do you not agree with?  A. That he went to his aunt's house.  Q. Where did he go?  A. You know, I'm unsure.  Q. Would it be correct that, after this episode, you did kick him out of the house?  A. No.  Q. Were you with him in the emergency room  A. Yes.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	traumatic past as it relate to his vehicular homicide which increased his guilt, shame and depression. Client is hoping to work things through with his wife."  What was he referring to by telling the therapist you were verbally abusing him about his past and in particular the accident?  A. I knew that, if Chris was to stay sober, he had to deal with that accident and the guilt, and I would bring it up, that he had to deal with it.  Q. What kind of things would you say to him?  A. That the guilt was eating him up inside and that he had to find some way to deal with that. And I didn't know how.  Q. Did you get the feeling when you would bring that subject up with him, that he would feel depressed?  A. I knew that he felt guilty. I knew it would make him I knew that it made him feel worse, but I knew that denying it and pretending like it didn't happen was making things worse.  Q. One last question on this one. On page 7 there's a list of mental health status exam items, and is	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	home on Zoloft, 100," I'm not sure what the dosage is there, but it says 100 something. "Violent when mixed with alcohol per wife. She kicked him out. He went to his aunt's who is also angry."  Was this the incident you told me about where he was taking Zoloft and then tried to take alcohol to come down from that?  A. Yes.  Q. According to this, it appears that he went to his aunt's after you kicked him out of the house? Do you agree with that?  A. No.  Q. Which part do you not agree with?  A. That he went to his aunt's house.  Q. Where did he go?  A. You know, I'm unsure.  Q. Would it be correct that, after this episode, you did kick him out of the house?  A. No.  Q. Were you with him in the emergency room  A. Yes.  Q during this time?

<u> </u>	66		68
1	this information, or do you think it came from	1	Q. Do you have a card or something?
2	Christopher?	2	A. No.
3	A. It came from Chris.	3	MR. MARTIN: I guess the best method would
4	Q. It also says a little further down, and this is	4	be to check it on the Internet to see if we can track it
5	referring to you, "She's livid about his behavior,	5	down that way.
6	especially his lying about his use."	6	BY MS. BALLARD:
7	Is that accurate?	7	Q. Was this through Chris's work that he got the
8	A. Yes.	8	prescriptions through Medco? Why did he start using
9	Q. Is that something you expressed to the nurses	9	Medco I guess is my question?
10	there?	10	A. I want to say there was a thing that it was
11	A. Yes.	11	less money for a three months' supply versus I'm
12	Q. Three lines from the bottom of that big	12	unsure, because I never actually had to do it. But I
13	paragraph is it correct it says, "Denies suicidal on unit	13	think it was less expensive if you went through Medco
14	but not if he goes home"?	14	versus going to the
15	A. Yes.	15	Q. Was the prescription coverage through his work?
16	Q. It also says after that, "As of this moment,	16	A. Yes.
17	wife does not want him to return"?	17	Q. Through Pepsi?
18	A. No. Your question is does it say that? Yes.	18	A. Yes.
19	Q. You do not agree with that?	19	Q. In October of '04 he filled another drug,
20	A. I wanted him hospitalized. I didn't want him	20	Albuterol, at the Shop Rite; is that right?
21	to come home. I wanted him hospitalized.	21	A. Yes.
22	Q. Was he hospitalized after this?	22	Q. Is there a reason he didn't use Medco for that
23	A. I don't remember. I'd have to look at the	23	one?
24	medical records.	24	A. Other than he only took that when he had
	67		69
1	Q. That's all I have on that.	1	breathing problems and so he probably didn't use it as
2	Let's get this next one marked as the next	2	often, versus he knew that he was going to be on the
3	number.	3	Depakote, Seroquel, and Effexor for a long time.
4	(Barkes Deposition Exhibit No. 3 was marked	4	Q. Do you recall prescriptions of Depakote,
5	for identification.)	5	Effexor, and Seroquel being mailed to the house in
6	BY MS. BALLARD:	6	October 2004?
7	Q. This is a record we subpoenaed from the Shop	7	A. Yes.
8	Rite pharmacy, and it's their record of prescriptions	8	Q. That's all I have on that.
9	that Christopher filled there. Is it correct that in	9	MS. BALLARD: This is the last one.
10	September of '04 it appeared he was filling prescriptions	10	(Barkes Deposition Exhibit No. 4 was marked
11	for Depakote, Effexor, and Seroquel?	11	for identification.)
12	A. What was the date?	12	BY MS. BALLARD:
13	Q. September 3rd, '04, and September 9th, '04.	13	Q. I ask you to take a look at this one. This is
14	A. Yes.	14	a record from Rockford Center, admission date 9/10/04 by
	Q. Who is Dr. Jacobson that prescribed those?	15	a Mujib Obeidy, M.D. Let me know when you're ready.
15	Q. Who is Dr. sacoson that presented those;		
15 16	A. That was the doctor from Rockford.	16	For the record, this is P 196 through 198
	<ul><li>A. That was the doctor from Rockford.</li><li>Q. According to this, it appears he did not refill</li></ul>	16 17	of plaintiffs' production.
16	A. That was the doctor from Rockford.		
16 17	<ul><li>A. That was the doctor from Rockford.</li><li>Q. According to this, it appears he did not refill</li></ul>	17	of plaintiffs' production.
16 17 18	<ul> <li>A. That was the doctor from Rockford.</li> <li>Q. According to this, it appears he did not refill those prescriptions after September of 2004.</li> </ul>	17 18	of plaintiffs' production.  Do you recall Chris being admitted to
16 17 18 19	<ul> <li>A. That was the doctor from Rockford.</li> <li>Q. According to this, it appears he did not refill those prescriptions after September of 2004.</li> <li>A. He started getting them through Medco.</li> </ul>	17 18 19	of plaintiffs' production.  Do you recall Chris being admitted to  Rockford Center in September '04 after a three-day
16 17 18 19 20	<ul> <li>A. That was the doctor from Rockford.</li> <li>Q. According to this, it appears he did not refill those prescriptions after September of 2004.</li> <li>A. He started getting them through Medco.</li> <li>Q. All three of those?</li> </ul>	17 18 19 20	of plaintiffs' production.  Do you recall Chris being admitted to  Rockford Center in September '04 after a three-day alcohol binge?
16 17 18 19 20 21	<ul> <li>A. That was the doctor from Rockford.</li> <li>Q. According to this, it appears he did not refill those prescriptions after September of 2004.</li> <li>A. He started getting them through Medco.</li> <li>Q. All three of those?</li> <li>A. Yes.</li> </ul>	17 18 19 20 21	of plaintiffs' production.  Do you recall Chris being admitted to Rockford Center in September '04 after a three-day alcohol binge?  A. Yes.

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	70		72
1	Q. At the bottom of the paragraph titled "History	1	MS. BALLARD: That's all I have. Thank
2	of Present Illness," is it correct the report says, "He,"	2	you.
3	meaning Chris, "also states that after he was kicked out	3	Do you have any?
4	of his house he has not had access to his medication"?	4	BY MR. HAGER:
5	A. Yes.	5	Q. Just real briefly. My name is Gerry Hager, and
6	Q. Do you know if he went to live with Aunt Helen	6	I represent First Correctional in this matter.
7	this particular time?	7	Have you ever talked with anyone at First
8	A. No.	8	Correctional Medical regarding his treatment at the
9	Q. He did not?	9	prison?
10	A. You mean after or those three days?	10	A. Not his treatment. I was trying to get his
11	Q. When he was kicked out of the house.	11	records.
12	A. No.	12	Q. Who did you talk to?
13	Q. Who was he with?	13	<ol> <li>The receptionist who picked up in Arizona.</li> </ol>
14	A. This is the when he was with that girl,	14	Nowhere I kind of got I got bounced around. They
15	Kathy.	15	said they wouldn't give me his medical records.
16	Q. Right. This is when the probation officer came	16	Q. So you made a call to Arizona?
17	to her house and picked him up.	17	A. Yes. And then they gave me the office here and
18	Under "Mental Status Examination" on page	18	they gave me the prison.
19	2, the report indicates: "Appears to be very concerned	19	<ul> <li>Q. During those telephone calls, did anyone ever</li> </ul>
20	about the problems that he is having with his wife"	20	talk to you at all about his care at the prison?
21	Do you know what he was referring to in	21	A. No.
22	September of '04?	22	Q. Did you ever talk to any of the individual
23	A. Yes. Me being angry that he was getting high	23	employees at First Correctional Medical other than the
24	again or drinking again.	24	receptionist that you talked to?
	71		. 73
1	Q. Any other problems you can think of that he	1	A. No.
2	might have been referring to?	2	MR. HAGER: That's all I have. Thank you.
3	A. No.	3	MR. MARTIN: I have no questions. We will
4	Q. The last page, page 3, under "Treatment Plan,"	4	read and sign.
5	is it correct that this doctor wrote: "I will not start	5	(Deposition concluded at 12:05 p.m.)
6	him on any Depakote"? Is that what it says?	6	
7	A. Yes.	7	
8	Q. That's all I had on that.	8	
9	Let me just go really briefly to the	9	
10	conversation you had with Chris on November 13th, 2004,	10	
11	when he called you from prison.	11	
12	I believe you said he told you he hadn't	12	
13	gotten high?	13	
14	A. Yes.	14	
15	Q. Did he sound intoxicated to you?	15	
16	A. No.	16	
17	Q. You said you sort of had a sixth sense about	17	
18	it. Did you get the feeling that he had gotten high?	18	
19	A. No.	19	
20	Q. You've seen the medical records and the autopsy	20	
21	report from that incident. If I represented that that	21	
22	report said he was not under the influence of any	22	
	•	١	
23	substances, would that be your recollection, also?	23	

		74	76
1	TESTIMONY		CERTIFICATE OF REPORTER
2 3	DEPONENT: KAREN S. BARKES	PAGE	STATE OF DELAWARE)
4 5	BY MS. BALLARD2		NEW CASTLE COUNTY)
6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	BY MR. HAGER	MARKED	I, Kimberly A. Hurley, Registered Professional Reporter and Notary Public, do hereby certify that there came before me on the 24th day of September, 2007, the deponent herein, KAREN S. BARKES, who was duly sworn by me and thereafter examined by counsel for the respective parties; that the questions asked of said deponent and the answers given were taken down by me in Stenotype notes and thereafter transcribed by use of computer-aided transcription and computer printer under my direction.  I further certify that the foregoing is a true and correct transcript of the testimony given at said examination of said witness.  I further certify that I am not counsel, attorney, or relative of either party, or otherwise interested in the cyclic this suit.  **Limbury A- Lucley** Kimber durley Certification No. 126-RPR (Expires January 31, 2008)  DATED: September 27, 2007
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	REPLACE THIS PAGE	, 5	
	WITH THE ERRATA SHEET		
	AFTER IT HAS BEEN		
	COMPLETED AND SIGNED		
	BY THE DEPONENT		

<sup>20 (</sup>Pages 74 to 76)

#### IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

Defendants. )  COMPLAIN	NT 4: 34
DEPARTMENT OF CORRECTION, )	BISTORIA.
OF FIRST CORRECTIONAL MEDICAL, ) INC.; and STATE OF DELAWARE )	20w
INDIVIDUAL EMPLOYEES )	
CORRECTION; CERTAIN UNKNOWN )	
DELAWARE DEPARTMENT OF )	·
INDIVIDUALEMPLOYEES OF THE STATE OF )	
WILLIAMS; CERTAIN UNKNOWN )	t in the second of the second
INC.; STANLEY TAYLOR; RAPHAEL )	
FIRST CORRECTIONAL MEDICAL,	JURY TRIAL DEMANDED
<b>v.</b>	Civil Action No. 08 104
Plaintiffs, )	
of the ESTATE OF CHRISTOPHER BARKES,	)
BARKES; and KAREN BARKES as administratrix)	
GROSSMAN as next friend of ALEXANDRA	
friend of BRITTANY BARKES; TINA	
KAREN BARKES individually; TINA GROSSMAN as next	

- Plaintiff Karen Barkes individually is, and at all times relevant hereto was, a 1. resident of Wilmington, Delaware, and was the wife of decedent Christopher Barkes (who is hereinafter sometimes referred to as "Mr. Barkes") at the time of the death of Christopher Barkes.
- 2. Plaintiff Tina Grossman is the mother and next friend of Brittany A. Barkes (hereinafter sometimes referred to as "Brittany," date of birth August 30, 1989) and Alexandra

M. Barkes (hereinafter sometimes referred to as "Alexandra," date of birth March 9, 1993), who are the children of Christopher Barkes.

- 3. Plaintiff Karen Barkes as Administratrix of the Estate of Christopher Barkes has been appointed Administratrix of the Estate of Christopher Barkes by the New Castle County Register of Wills.
- 4. Defendant Stanley Taylor is the Commissioner of Correction for the State of Delaware, and in that capacity is the Chief Officer of the Department of Correction (the department will hereinafter sometimes be referred to as the "DOC."
- 5. Defendant Raphael Williams is and was at all times relevant hereto the Warden of the Howard R. Young Correctional Institution (which was formerly often referred to as "Gander Hill," and which will hereinafter be referred to as "HRYCI").
- 6. Defendants, unknown individual employees of the DOC, were, on information and belief, involved in the care and custody of Christopher Barkes, either directly or indirectly by virtue of their obligations to properly administer such care and custody, at relevant times hereto.
- 7. Defendant, State of Delaware Department of Correction, is a subdivision of the State of Delaware.
- 8. Defendant, First Correctional Medical, Inc. (hereinafter sometimes referred to as "FCM"), is, on information and belief, a corporation responsible, at all times relevant hereto, for the performance of medical services within HRYCI pursuant to a contract with the State of Delaware.

9. Defendants, unknown individual employees of FCM, were, on information and belief, involved in the care and custody of Christopher Barkes, either directly or indirectly by virtue of their obligations to properly administer such care and custody, at relevant times hereto.

#### **Jurisdiction**

10. The United States District Court for the District of Delaware has jurisdiction over the parties and the claims by virtue of the pendency of a federal claim under 42 U.S.C. § 1983 and 28 U.S.C. §§ 1331 and 1343, and under the principles of ancillary and pendent jurisdiction as well as the supplemental jurisdiction provisions of 28 U.S.C. § 1367.

#### **Facts**

- 11. Christopher Barkes, whose date of birth was December 12, 1966, was found to have committed suicide at age 37 on or about November 14, 2004, while incarcerated at HRYCI.
- 12. Seven years prior to his suicide, in 1997, Mr. Barkes was involved in an automobile accident while under the influence of alcohol, which accident resulted in the deaths of two other involved parties.
- 13. As a result of his involvement in the aforesaid motor vehicle accident, Mr. Barkes pleaded guilty to two counts of vehicular homicide and was sentenced to two years in prison to be followed by an extended period of probation.
- 14. Mr. Barkes was deeply impacted by the tragic auto accident identified above; psychological reports relating to his frame of mind, generated as a result of treatment he received in the years after the vehicular homicide, indicate that he was wracked with extreme guilt over the deaths that had resulted from the accident, and he had been diagnosed as suffering from post-traumatic stress disorder resulting from that accident.

- 15. As a result of the post-traumatic stress disorder and related guilt, depression, and anxiety, certain alcohol and drug problems of Mr. Barkes were exacerbated, and in November of 2003 he attempted suicide by overdosing on pills, although he survived.
- 16. On information and belief, Mr. Barkes attempted suicide on at least one other occasion while incarcerated at HRYCI.
- 17. In February of 2004, as part of a sentencing order related to, *inter alia*, certain violations of his probation, Mr. Barkes was ordered as follows by the Family Court of the State of Delaware: to continue certain psychiatric day treatment services he was obtaining from Psychotherapeutic Services, Inc.; to attend at least five meetings of Alcoholics Anonymous per week; to be evaluated for emotional and/or psychological problems; and to take such mental health medication as was prescribed.
- 18. On September 10, 2004 while receiving care at Chrisitana Care Hospital, Mr. Barkes tried to kill himself using his IV tubing. Mr. Barkes' probation officers were notified.
- 19. On November 13, 2004 Christopher Barkes was incarcerated at HRYCI for loitering, in violation of his probation.
- 20. During the initial intake of Christopher Barkes, on November 13, 2004, employees of defendant FCM noted that Christopher Barkes took the following medications: Depakote XR, Seroquel and Effexor XR, whose clinical use is to treat depression and bipolar disorder.
- 21. Christopher Barkes was not given any of the above-listed medications by FCM personnel on November 13, 2004 or thereafter.

- 22. The intake form prepared at the time of Mr. Barkes' entry into HRYCI, which was signed by a member of the FCM intake nursing staff, was checked "yes" next to the inquiry, "Have you ever attempted suicide?"
- 23. The initial period of any incarceration is often a critical time for detecting potential suicides, as noted in the Program Statement of the United States Bureau of Prisons relating to suicide prevention.
- 24. Upon information and belief, instead of double-bunking Christopher Barkes (which is to say, housing him with a cellmate) or placing him in a suicide watch cell or "Ram room", Christopher Barkes was housed alone in cell F-122.
- 25. With regard to incarcerated individuals who have a history of suicidal ideation and are believed to be suicidal, the National Commission on Correctional Health Care ("NCCHC") calls for double-bunking and constant supervision.
- 26. Upon information and belief, Christopher Barkes was not placed under constant supervision nor was his status checked at regularly-scheduled intervals sufficient to prevent his suicide.
- 27. Upon information and belief, defendants either made provision to Christopher Barkes, or authorized the provision to Christopher Barkes, or failed to prevent the provision to Christopher Barkes, of bedding (such as bed sheets and linens) and/or other items that could be used by a suicidal inmate to harm himself.
- 28. Upon information and belief, at approximately 11:40 a.m. on November 14, 2004, Christopher Barkes was found unconscious in his cell by prison officials, who determined that he had hung himself with bedsheets.

- 29. Prison officials and/or FCM personnel attempted to revive Christopher Barkes unsuccessfully.
  - 30. Christopher Barkes was thereafter transferred to Christiana Hospital.
- 31. The ER referral completed by FCM and/or DOC personnel relating to the transfer of inmate Christopher Barkes to Christiana Hospital expressly noted that Mr. Barkes had a history of bipolar disorder.
- Christopher Barkes was pronounced dead in Christiana Hospital on November 14,
   2004.

#### COUNT I

# Violation of Civil Rights under Color of State Law, 42 U.S.C. § 1983 – Cruel and Unusual Punishment (by Karen Barkes as Administratrix against all individual defendants and FCM)

- 33. Paragraphs 1 to 32 are restated as if more fully set forth herein.
- 34. The vulnerability of Christopher Barkes to suicide constituted a serious medical need of which defendants knew or should have known, and the actions and/or inactions of defendants, under color of state law, in addressing or failing to address that need, constituted deliberate indifference which could be expected to lead to substantial and unnecessary suffering, injury, and/or death, and which did in fact lead to the death of Mr. Barkes.
- 35. As a result of the wrongful actions of the defendants, Mr. Barkes suffered attendant physical injuries, mental anguish, pain and suffering, and death, and was deprived of his right to life and his right to be free from cruel and unusual punishment, for which plaintiff Karen Barkes as Administratrix now seeks compensation.

#### COUNT II

Violation of Civil Rights under Color of State Law, 42 U.S.C. § 1983 –
Failure to train and/or maintenance of wrongful customs, practices and polices
(by Karen Barkes as Administratrix against FCM as a person and as a state actor, and against the individual FCM defendants)

- 36. Paragraphs 1-35 are restated as if more fully set forth herein.
- 37. In performing its medical services for the DOC, FCM and the individual FCM defendants were state actors performing state functions under color of state law.
- 38. The death of Christopher Barkes was the direct result of the customs, practices, policies and procedures of FCM and the individual FCM defendants, including but not limited to: a failure to properly train and supervise FCM personnel so as to properly recognize suicidal inmates and how to properly care for inmates identified as making previous attempts on their life, and/or a failure to institute appropriate procedures for the timely transmission of important medical information to appropriate personnel.
- 39. The aforesaid actions of FCM and the individual FCM defendants amounts to deliberate indifference to the rights of inmates, including the rights of Mr. Barkes.
- 40. As a result of the wrongful actions of the defendants, Mr. Barkes suffered attendant physical injuries, mental anguish, pain and suffering, and death, and was deprived of his right to life and his right to be free from cruel and unusual punishment, for which plaintiff Karen Barkes as Administratrix now seeks compensation.

#### **COUNT III**

Violation of Civil Rights under Color of State Law, 42 U.S.C. § 1983 – Failure to train and/or maintenance of wrongful customs, practices and polices (by Karen Barkes as Administratrix against the State of Delaware Department of Corrections and the individual defendant employees of the DOC)

- 41. Paragraphs 1 to 40 are restated as if more fully set forth herein.
- 42. The death of Christopher Barkes was the direct result of the customs, practices, policies and procedures of defendant Stanley Taylor, defendant Raphael Williams, the individual DOC defendants, and the defendant State of Delaware Department of Correction, including but not limited to: a failure to properly train and supervise DOC personnel so as to properly recognize suicidal inmates and how to properly care for inmates identified as making previous attempts on their life, and/or a failure to institute appropriate procedures for the timely transmission of important medical information to appropriate personnel.
- 43. The aforesaid actions of defendants constitute deliberate indifference to the rights of inmates who come into contact with employees of the DOC and FCM, including the rights of Mr. Barkes.
- 44. As a direct and proximate result of the actions of the Defendants, Christopher Barkes suffered attendant physical injuries, mental anguish, pain and suffering, and death, and was deprived of his right to life and his right to be free from cruel and unusual punishment, for which plaintiff Karen Barkes as Administratrix now seeks compensation.

#### **COUNT IV**

Wrongful Death under 10 Del. C. § 3724 (by Karen Barkes individually and Tina Grossman as next friend of Alexandra and Brittany Barkes, against FCM and the individual defendants)

45. Paragraphs 1-44 are restated as if more fully set forth herein.

- 46. The aforesaid actions of the defendants caused the wrongful death of Christopher Barkes.
- 47. Plaintiffs are authorized to recover for the damages they have suffered as a result of the wrongful death of Christopher Barkes pursuant to the terms of 10 Del. C. § 3724, and they have suffered severe damages as identified thereunder, including but not limited to the loss of companionship and support of their husband and/or father, Christopher Barkes, with attendant and severe emotional anguish.

#### **COUNT V**

### Survival action under 10 Del. C. § 3701 for medical malpractice (by Karen Barkes as Administratrix against FCM and the individual FCM defendants)

- 48. Paragraphs 1-44 are restated as if more fully set forth herein.
- 49. The aforesaid actions of the defendants constituted medical malpractice, causing great pain and suffering, physical injury, and death to Christopher Barkes.
- 50. Plaintiff Karen Barkes as Administratrix is authorized to recover for the damages suffered by Christopher Barkes as a result of the medical malpractice of the defendants, pursuant to 10 Del. C. § 3701.

WHEREFORE, plaintiffs demand that judgment be entered in their favor against defendants on the above claims, including awards of compensatory damages, punitive damages, costs of suit, interest, attorneys' fees under 42 U.S.C. § 1988 and any other appropriate or relevant statutory or common law basis, and such other and further relief as this Court may deem appropriate.

MARGOLIS EDELSTEIN

Jeffrey K. Martin, Esquire (#2407)

1509 Gilpin Avenue

Wilmington, Delaware 19806

(302) 777-4680

jmartin@margolisedelstein.com

Attorneys for Plaintiff

DATE: February 16, 2006

### IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, individually;	)
TINA GROSSMAN as next friend of	)
BRITTANY BARKES; TINA	)
GROSSMAN as next friend of	)
ALEXANDRA BARKES; and	)
KAREN BARKES as administratrix	)
of the ESTATE OF CHRISTOPHER	)
BARKES,	) C. A. No. 06-104-JJF
	)
Plaintiffs,	)
	)
v.	)
	)
FIRST CORRECTIONAL MEDICAL	)
INC.; STANLEY TAYLOR;	)
RAPHAEL WILLIAMS;	)
CERTAIN UNKNOWN INDIVIDUAL	)
EMPLOYEES OF STATE OF	)
DELAWARE DEPARTMENT OF	)
CORRECTION; CERTAIN	)
UNKNOWN INDIVIDUAL	)
EMPLOYEES OF FIRST	)
CORRECTIONAL MEDICAL, INC.,	)
And STATE OF DELAWARE,	)
DEPARTMENT OF CORRECTION,	)
	)
Defendants.	)

# ANSWER AND CROSSCLAIM OF STATE OF DELAWARE DEFENDANTS: DEPARTMENT OF CORRECTION, STANLEY TAYLOR, RAPHAEL WILLIAMS AND "UNKNOWN EMPLOYEES" OF STATE OF DELAWARE

COME NOW, State of Delaware defendants, Department of Correction, Stanley Taylor, Raphael Williams and "unknown employees" of the State of Delaware, and answer plaintiff's complaint as follows: Unless expressly admitted or qualified, all of the allegations in the Complaint are generally denied.

1. Admitted, upon information and belief.

- 2. Defendants are currently without knowledge or information sufficient to form a belief as to the truth or falsity of this averment.
- 3. Defendants are currently without knowledge or information sufficient to form a belief as to the truth or falsity of this averment.
- 4. Admitted that Defendant Stanley W. Taylor, Jr. was appointed by the Governor of the State of Delaware as the Commissioner of the Delaware Department of Correction (DOC), and currently serves in that position.
  - 5. Admitted.
- 6. Admitted that decedent, Christopher Barkes, was in the custody of DOC, at the Howard R. Young Correctional Institution (HRYCI), at or about the time of his death. Defendants are currently without knowledge or information sufficient to form a belief as to the truth or falsity of the balance of this averment.
- 7. Admitted that the Department of Correction is a department within the executive branch of the State of Delaware government.
- 8. Admitted. At all relevant times, First Correctional Medical, Inc. was responsible for the provision and performance of medical services to inmates at HRYCI as well as other State correctional institutions.
- 9. Defendants are currently without knowledge or information sufficient to form a belief as to the truth or falsity of this averment.
- 10. Admitted, upon information and belief. However State Defendants reserve all defenses, including jurisdictional defenses, which may be available to them.
  - 11. Admitted.

- 12. Defendants are generally aware of this incident which resulted in a criminal conviction against Christopher Barkes. Defendants are currently without knowledge or information sufficient to form a belief as to the truth or falsity of the particulars of this averment.
- 13. Defendants are generally aware of this incident which resulted in a criminal conviction against Christopher Barkes. Defendants are currently without knowledge or information sufficient to form a belief as to the truth or falsity of the particulars of this averment.
- 14. Defendants are without knowledge or information sufficient to respond to this averment. Otherwise, denied.
- 15. Defendants are without knowledge or information sufficient to respond to this averment. Otherwise, denied.
  - 16. Upon information and belief, Denied.
- 17. Defendants are without knowledge or information sufficient to respond to this averment.
- 18. Defendants are without knowledge or information sufficient to respond to this averment.
- 19. Admitted that on November 13, 2004, decedent, Christopher Barkes, was arrested by Wilmington Police Department, and subsequently incarcerated that same day at HRYCI. Upon information and belief, Barkes was arrested for loitering for the purpose of purchasing drugs and driving while revoked, in violation of an existing order of probation imposed as a result of a domestic violence assault conviction.

- 20. Defendants are without knowledge or information sufficient to respond to this averment.
- 21. Defendants are without knowledge or information sufficient to respond to this averment.
- 22. Defendants are without knowledge or information sufficient to respond to this averment.
- 23. This averment calls for legal and/or medical conclusions and opinions of ultimate fact to which no response is deemed necessary. Should an answer be deemed necessary, this averment is denied in its entirety.
- 24. Admitted, upon information and belief, that during the less than 24 hours of his incarceration on November 13-14, 2004, Christopher Barkes was housed in a cell (#122) in the Booking and Receiving area of HRYCI. Otherwise, denied.
- 25. This averment calls for legal and/or medical conclusions and opinions of ultimate fact to which no response is deemed necessary. Should an answer be deemed necessary, this averment is denied in its entirety.
  - 26. Denied as alleged.
  - 27. Denied as alleged.
- 28. Admitted that Christopher Barkes was found to have committed suicide on the morning of November 14, 2005. Defendants are without knowledge or information sufficient to respond to the particulars of this averment.
- 29. Admitted. In addition, upon information and belief, an EMT/ambulance crew was promptly called to HRYCI and attempted to resuscitate Christopher Barkes.
  - 30. Admitted.

- 31. Defendants are without knowledge or information sufficient to respond to this averment.
  - 32. Upon information and belief, Admitted.
- 33. Answering defendants restate and incorporate herein by reference the responses set forth in paragraphs 1 through 32 above.
  - 34. Denied.
  - 35. Denied.
- 36. Answering defendants restate and incorporate herein by reference the responses set forth in paragraphs 1 through 35 above.
- 37. This averment states and calls for legal conclusions to which no response is deemed necessary. Should an answer be deemed necessary, this averment is denied in its entirety.
- 38. This allegation is not directed to answering State defendants. To the extent an answer is required, or to the extent Plaintiffs seek to impute FCM's liability, if any, to the State, this averment is denied.
- 39. This allegation is not directed to answering State defendants. To the extent an answer is required, or to the extent Plaintiffs seek to impute FCM's liability, if any, to the State, this averment is denied.
  - 40. Denied.
- 41. Answering defendants restate and incorporate herein by reference the responses set forth in paragraphs 1 through 40 above.
  - 42. Denied.
  - 43. Denied.

- 44. Denied.
- 45. Answering defendants restate and incorporate herein by reference the responses set forth in paragraphs 1 through 44 above.
  - 46. Denied.
  - 47. Denied.

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- 48. Answering defendants restate and incorporate herein by reference the responses set forth in paragraphs 1 through 47 above.
- 49. This allegation is not directed to answering State defendants. To the extent an answer is required, or to the extent Plaintiffs seek to impute FCM's liability, if any, to the State, this averment is denied.
- 50. This allegation is not directed to answering State defendants. To the extent an answer is required, or to the extent Plaintiffs seek to impute FCM's liability, if any, to the State, this averment is denied.

#### RELIEF

- 1. It is specifically denied that plaintiffs are entitled to damages, including compensatory damages, punitive damages and/or attorneys' fees.
  - 2. It is specifically denied that plaintiffs are entitled to any relief.
- 3. Plaintiffs are not entitled to punitive damages for liability, if any, under 10 <u>Del.C.</u> §3724.

#### AFFIRMATIVE DEFENSES

1. The State defendants are immune from liability to plaintiffs under the doctrine of sovereign immunity.

- 2. The State defendants are immune from liability under the Eleventh Amendment of the United States Constitution.
- 3. The State of Delaware, Department of Correction, and State defendants in their official capacities are not subject to suit or liable for alleged violations of plaintiff=s constitutional rights as they are not "persons" pursuant to 42 U.S.C.A. §1983.
- 4. Officials and employees of the State of Delaware acting in good faith within the scope of their employment and without knowingly violating well established federal rights, are entitled to qualified immunity and cannot be held liable in this action.
- 5. The State defendants are immune from liability to the plaintiff under the Delaware State Tort Claims Act. 10 Del.C. §4001 et. seq.

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- 6. Individual defendants cannot be held liable in the absence of personal involvement for alleged constitutional deprivations.
- 7. To the extent the Plaintiffs seek to hold the defendants liable based on supervisory responsibilities, the Doctrine of Respondent Superior is not a basis for liability in an action under 42 U.S.C.A. §1983.
- 8. To the extent Plaintiffs' claims sound in negligence, Plaintiffs cannot state a cause of action under 42 U.S.C.A. §1983.
- 9. Plaintiffs fail to state a claim against State defendants for failure to train and maintenance of wrongful customs, practices and policies.
- 10. Plaintiffs fail to state a claim against State defendants for violation of the Eighth Amendment as a result of denial of medical care.
- 11. Decedent's illness, if any, existed prior to the date of the alleged wrongful conduct by defendants.

- 12. The extent of Decedent's illness, if any, was not known to or reasonably ascertainable by Defendants prior to his death.
- 13. Decedent's injuries, and Plaintiffs' damages, if any, resulted from an intervening and superseding cause.
- 14. Decedent contributed to his injuries, including, but not necessarily limited to, concealing his illness (if any) and/or the extent of his illness, proximately causing his own injuries and Plaintiffs' damages, if any, arising from the alleged incident.
  - 15. Plaintiffs otherwise fail to state a claim upon which relief may be granted.

# STATE DEFENDANTS' CROSSCLAIM AGAINST FIRST CORRECTIONAL MEDICAL, INC. (FCM), FOR CONTRACTUAL DEFENSE AND INDEMNIFICATION

#### **JURISDICTION**

1. The District Court has jurisdiction over the State Defendants' crossclaim against FCM pursuant to 28 U.S.C.A. §§ 1367, as well as Federal Rules of Civil Procedure 13(g) and 18.

#### COUNT I

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#### CONTRACTUAL INDEMINIFICATION

2. The State of Delaware Department of Correction and Defendant, First Correctional Medical-Delaware, L.L.C. (FCM), were parties to a contract for the provision of medical services to the Delaware Department of Correction's inmate population, applicable and effective during November, 2004, and at all relevant times to this action.

3. The contract specifically created in co-defendant, First Correctional Medical-Delaware, L.L.C., a clear and unequivocal duty to

hold harmless, indemnify and defend the DOC [Department of Correction], the State of Delaware and their agents, employees or officers . . . from any and all suits, actions, losses, liability, damages (including punitive damages), expenses, reasonable attorney fees (including salaries of attorneys regularly employed by the State of Delaware), judgments or settlements . . . arising out of the provision of health care services by FCM, its employees, or subcontractors under the contract, including direct or indirect negligence or intentional acts of omission or commission, and professional malpractice regardless of any intentional acts o[r] omissions or commission by employees or officials of the DOC.

(6/17/02 Contract, ¶8. Hereinafter referred to as the "hold harmless provision").

- 4. All conditions precedent to recovery under the contract, if any, have been satisfied or waived.
- 5. According to the contract and the language of the hold harmless provision, the State Defendants are third-party beneficiaries of the contract.
- 6. State Defendants have been required to be represented by the undersigned counsel rather than an attorney provided by co-defendant First Correctional Medical.
- 7. The State of Delaware Department of Correction has been required to expend public funds necessary to the litigation of this matter.
- 8. Injuries, if any, to decedent and Plaintiffs were proximately caused by the actions, omissions and/or professional malpractice of defendant, First Correctional Medical.
- 9. The State Defendants deny any liability arising out of any allegation by any party in this litigation. Defendant, First Correctional Medical, is liable for defense and indemnification of the State and State Defendants under the hold harmless provision

even if the State and/or any State Defendant is found to have engaged in negligent, intentional or other conduct resulting in injury and liability to decedent and/or plaintiffs.

#### **COUNT II**

#### **COMMON LAW INDEMNIFICATION**

- 10. The State Defendants incorporate by reference paragraphs 1-9 of the crossclaim as if more fully set forth herein.
- 11. The State Defendants deny any liability arising out of any allegation by any party in this litigation. To the extent Plaintiffs are successful in recovering any award against any State Defendant, the State Defendants are entitled to be held harmless, defended, and indemnified pursuant to the express language of the hold harmless provision of the contract.
- 12. Should the Court rule that any portion of the contract or the hold harmless provision is inapplicable or void, the State Defendants are entitled to common law indemnification in the alternative. In the event that any State Defendant is found liable to the Plaintiffs, then the State Defendants cross-claim against co-defendant First Correctional Medical, whose negligence was the primary and proximate cause of any and all damage sustained by the Plaintiffs, and for which the State Defendants, if liable at all, are only secondarily liable. The State Defendants are therefore entitled to common law indemnification in the event that their claim for contractual indemnification is rejected by the Court.
- 13. With respect to any state law claim for negligence or any recovery thereunder, the State Defendants' cross-claim against co-defendant First Correctional

Medical, to have the relative degrees of fault apportioned pursuant to the Uniform Contribution Among Tortfeasors Law, 10 Del. C. § 6301, et seq.

WHEREFORE, State Defendants demand that judgment be entered in their favor as to all claims, and against the plaintiffs as to all claims, and that costs and attorney fees be awarded to the State Defendants. The State Defendants further demand that judgment be entered in their favor as to the instant cross-claim and that costs and attorney fees incurred in relation thereto be awarded to the State Defendants.

> STATE OF DELAWARE DEPARTMENT OF JUSTICE

/s/ Stephani J. Ballard STEPHANI J. BALLARD (ID # 3481) Deputy Attorney General State of Delaware Department of Justice Carvel State Office Building 820 North French Street Wilmington, DE 19801 (302) 577-8400 Attorney for State Defendants

DATED: April 7, 2006

### IN THE UNITED STATES DISTRICT COURT IN AND FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et. al.,	·
Plaintiffs, )	
v. )	C. A. No. 06-104-JJF
FIRST CORRECTIONAL MEDICAL ) INC.; et.al.,	
Defendants. )	

#### CERTIFICATE OF MAILING AND/OR DELIVERY

The undersigned certifies that on April 7, 2006, she caused the attached, Answer and Crossclaim of State of Delaware Defendants: Department of Correction, Stanley Taylor, Raphael Williams and "Unknown Employees" of State of Delaware, to be electronically filed with the Clerk of Court using CM/ECF which will send notification of such filing to the following:

Jeffrey K. Martin, Esquire Margolis Edelstein 1509 Gilpin Avenue Wilmington, DE 19806 Daniel L. McKenty McCullough & McKenty 1225 N. King Street, Suite 1100 P.O. Box 397 Wilmington, DE 19899-0397

### STATE OF DELAWARE DEPARTMENT OF JUSTICE

/s/ Stephani J. Ballard
Stephani J. Ballard, I.D. #3481
Deputy Attorney General
Carvel State Office Building
820 N. French Street, 6<sup>th</sup> Floor
Wilmington, DE 19801
(302)577-8400
Attorney for State Defendants

### UNITED STATES DISTRICT COURT DISTRICT OF DELAWARE

KAREN BARKES, et al.	)	
	)	
Plaintiffs	)	C.A. No. 06-104
	)	
V.	)	
FIRST CORRECTIONAL MEDICAL, INC., et al.	)	JURY OF 12 DEMANDED
11.C., 61 al.	)	
Defendants.	)	

#### FIRST CORRECTIONAL MEDICAL'S ANSWER TO STATE DEFENDANTS' CROSS-CLAIM AGAINST FIRST CORRECTIONAL MEDICAL FOR CONTRACTUAL DEFENSE AND INDEMNIFICATION

- 1. Admitted.
- 2. Admitted.
- 3. Denied. By way of further answer, the contractual language speaks for itself.
- 4. Denied.
- 5. Denied.
- 6. Denied.
- 7. Denied.
- 8. Wrongful conduct by answering defendant is denied and it is hereby denied that any actions of the answering defendant caused any illnesses, injuries, or damages of any nature to the plaintiff.
  - 9. Denied.
- 10. Answering defendants incorporate by reference paragraphs 1-9 of the Answer to the Cross-claim as if more fully set forth herein.

- 11. Denied.
- 12. Denied.
- 13. Denied. By way of further answer, co-defendant's paragraph 13 is nonsensical.

WHEREFORE, defendant First Correctional Medical demands that the action against it be dismissed and that it be awarded the costs of defense of this action.

#### FIRST AFFIRMATIVE DEFENSE

This claim is barred by the doctrine of Accord and Satisfaction.

#### SECOND AFFIRMATIVE DEFENSE

This claim is barred by State Defendants' Assumption of Risk.

#### THIRD AFFIRMATIVE DEFENSE

This claim is barred by State Defendants' Comparative Negligence.

#### FOURTH AFFIRMATIVE DEFENSE

This claim is barred by the doctrine of Estoppel.

#### FIFTH AFFIRMATIVE DEFENSE

This claim is barred for Failure of Consideration.

#### SIXTH AFFIRMATIVE DEFENSE

This claim is barred by Laches.

#### SEVENTH AFFIRMATIVE DEFENSE

State Defendants failed to state a claim upon which relief may be granted.

#### EIGHTH AFFIRMATIVE DEFENSE

The indemnification clause cited by State Defendants does not indemnify the State for acts of negligence committed by State Employees.

#### McCULLOUGH & McKENTY, P.A.

/s/ Dana Spring Monzo
Daniel L. McKenty, Del. Bar No. 2689
Dana Spring Monzo, Del. Bar No. 4605
1225 N. King Street, Suite 1100
P.O. Box 397
Wilmington, DE 19899-0397
(302) 655-6749
Attorneys for First Correctional Medical, Inc.

Dated: June 12, 2006

### UNITED STATES DISTRICT COURT DISTRICT OF DELAWARE

KAREN BARKES, et al.	)	
	)	
m1 / .100	)	G 1 37 05 10 1
Plaintiffs	)	C.A. No. 06-104
	)	
V.	)	
FIRST CORRECTIONAL MEDICAL,	)	JURY OF 12 DEMANDED
INC., et al.	)	1
Defendants.	)	
Defendants.	)	

#### **CERTIFICATE OF SERVICE**

I, Dana Spring Monzo, hereby certify that on this date a copy of the attached First Correctional Medical's Answer to State Defendants' Cross-Claim Against First Correctional Medical for Contractual Defense and Indemnification, was effled and served via first class mail upon the following:

Jeffrey K. Martin, Esquire Margolis Edelstein 1509 Gilpin Ave. Wilmington, DE 19806

Stephanie J. Ballard, Esquire Delaware Department of Justice Carvel State Office Building, 6th Floor 820 N. French Street Wilmington, DE 19801

#### McCULLOUGH & McKENTY, P.A.

/s/ Dana Spring Monzo
Daniel L. McKenty, Del. Bar No. 2689
Dana Spring Monzo, Del. Bar No. 4605
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P.O. Box 397
Wilmington, DE 19899-0397
(302) 655-6749
Attorneys for First Correctional Medical, Inc.

Dated: June 12, 2006

#### IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et al.	)	
Plaintiffs,	)	
<b>v.</b>	)	C. A. No. 06-104-JJF
FIRST CORRECTIONAL MEDICAL, INC, et al.,	)	
Defendants.	) )	

#### **RULE 16 SCHEDULING ORDER**

The parties having satisfied their obligations under Fed. R. Civ. P. 26(f), IT IS ORDERED that:

- 1. Pre-Discovery Disclosures. The parties will exchange the information required by Fed. R. Civ. P. 26(a)(1) and D. Del. LR 16.2 within 30 days after the date of entry of this Order.
- 2. Joinder of other Parties. All motions to join other parties shall be filed on or before January 31, 2007.
- 3. Settlement Conference. Pursuant to 28 U.S.C. § 636, this matter is referred to Magistrate Judge Thynge for the purposes of exploring the possibility of a settlement. If the parties agree that they would benefit from a settlement conference, the parties shall contact Magistrate Judge Thynge to schedule a settlement conference so as to be completed no later than the Pretrial Conference or a date ordered by the Court.
  - 4. Discovery.

- (a) Exchange and completion of interrogatories, identification of all fact witnesses and document production shall be commenced so as to be completed by August 31, 2007.
  - (b) Maximum of 25 interrogatories by each party to any other party.
  - (c) Maximum of <u>50</u> requests for admission by each party to any other party.
- (d) Maximum of 15 depositions by plaintiff(s) and 15 by defendant(s).
- (e) Reports from retained experts required by Fed. R. Civ. P. 26(a)(2) are due from the plaintiff(s) by May 31, 2007; from the defendant(s) by July 31, 2007.
- (f) Any party desiring to depose an expert witness shall notice and complete said deposition no later than thirty (30) days from receipt of said expert's report, unless otherwise agreed in writing by the parties.

#### 5. Discovery Disputes.

- (a) A party seeking discovery which the opposing party refuses to provide shall file a motion (no brief) pursuant to Rule 37 of the Federal Rules of Civil Procedure and Local Rule 37.1. Said motion shall not exceed a total of four (4) pages. An Answer to the Rule 37 motion, not to exceed four (4) pages, shall be filed within five (5) days of service of the motion. No reply is permitted.
- (b) All papers shall set forth in a plain and concise manner the issue(s) in dispute, the party's position on the issue(s), and the reasons for the party's position.
- (c) Upon receipt of the Answer, the movant shall notify Chambers by email at jjf\_civil@ded.uscourts.gov that the parties have completed briefing.

- (d) Upon receipt of the movant's e-mail, the Court will determine whether a conference is necessary and advise the parties accordingly.
- (e) There is no limit on the number of Rule 37 motions a party may file, unless otherwise ordered by the Court.
- 6. Amendment of the Pleadings. All motions to amend the pleadings shall be filed on or before January 31, 2007.
- 7. Case Dispositive Motions. Any case dispositive motions, pursuant to the Federal Rules of Civil Procedure, shall be served and filed with an opening brief on or before October 15, 2007. Briefing shall be pursuant to D. Del. LR 7.1.2. No case dispositive motion may be filed more than ten (10) days from the above date without leave of the Court.

#### 8. Applications by Motion.

- (a) Any applications to the Court shall be by written motion filed with the Clerk of the Court in compliance with the Federal Rules of Civil Procedure and the Local Rules of Civil Practice for the United States District Court for the District of Delaware (Amended Effective January 1, 1995). Any non-dispositive motion shall contain the statement required by D. Del. LR 7.1.1. Parties may file stipulated and unopposed Orders with the Clerk of the Court for the Court's review and signing. The Court will not consider applications and requests submitted by letter or in a form other than a motion.
  - (b) No facsimile transmissions will be accepted.
  - (c) No telephone calls shall be made to Chambers.

9. Pretrial Conference and Trial. After reviewing the parties' Proposed Scheduling Order, the Court will schedule a Pretrial Conference.

The Court will determine whether the trial date should be scheduled when the Scheduling Order is entered or at the Pretrial Conference. If scheduling of the trial date is deferred until the Pretrial Conference, the parties and counsel shall anticipate and prepare for a trial to be held within sixty (60) to ninety (90) days of the Pretrial Conference.

# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et al.	)
Plaintiffs,	)
<b>v.</b>	) C. A. No. 06-104-JJF
FIRST CORRECTIONAL	)
MEDICAL, INC.,	)
STANLEY TAYLOR, et al.,	)
	)
Defendants.	)

### STATE DEFENDANTS' RULE 26(a)(1) INITIAL DISCLOSURES

Defendants Department of Correction, Stanley Taylor, Raphael Williams, and "Unknown Employees" of the State of Delaware ("State Defendants") disclose the following information in compliance with Rule 26(a)(1) of the Federal Rules of Civil Procedure and the Scheduling Order in this matter. These disclosures are based on information reasonably available to State Defendants as of this date. Continuing investigation and discovery may alter these disclosures. State Defendants reserve the right to supplement the information disclosed below if additional information becomes available.

By making these disclosures, State Defendants do not represent that they are identifying every document, tangible thing, or witness possibly relevant to this claim. Nor do State Defendants waive their rights to object to the production of any document or tangible thing disclosed on the basis of any privilege, the work-product doctrine, relevancy, undue burden or any other valid objection. State Defendants' disclosures represent a good faith effort to identify information they reasonably believe is required by

Rule 26(a) (1).

State Defendants' disclosures are made without waiver of: 1) the right to object on the grounds of competency, privilege, relevancy and materiality, hearsay or other proper ground, 2) the right to object to the use of any such information, for any purpose, in whole or in part, in any other action; and 3) the right to object on any and all proper grounds, at any time, to any other discovery request or proceeding involving or relating to the subject matter of these disclosures.

All of the disclosures set forth below are made subject to the above objections and qualifications.

- (A) Individuals likely to have discoverable information in support of Defendants' defenses.
  - 1. John Polk, Department of Correction;
  - 2. Dorene Fields, Department of Correction;
  - 3. Stephen Martelli, Department of Correction;
  - 4. Sandra Rayne, Department of Correction;
  - 5. Fred Way, Department of Correction;
  - 6. Perry Phelps, Department of Services for Children, Youth and Their Families, (formerly of Department of Correction);
  - 7. Paul Howard, Department of Correction;
  - 8. Nurse Colleen Bell, First Correctional Medical;
  - 9. Nurse Courtney Kenton, First Correctional Medical;
  - 10. Nurse Gabriel Termilus, First Correctional Medical;
  - 11. Nurse Jackie, First Correctional Medical;
  - 12. Unknown intake Nurse on duty 11/13/04, First Correctional Medical;

14.

- Other unknown medical personnel employed by First Correctional 13. Medical;
- In addition, State Defendants reserve their rights, pursuant to Rule 26(e) to identify additional witnesses. State Defendants further reserve the right to identify and

Jennie Vershvovsky, M. D., Assistant Chief Medical Examiner

call any witnesses listed by the Plaintiff or other Defendant(s).

- Documents that may be used to support State Defendants' defenses **(B)** (copies [Bates # 001-00151] are being produced along with these disclosures):
- 1. Contents of Plaintiff's Institutional file, including but not limited to disciplinary, inmate grievance, classification, institutional records, criminal/sentencing information and related documentation contained therein;
- Any and all medical examination reports and records applicable to the 2. Plaintiff while incarcerated within the custody of the Department of Correction. All known records from Christopher Barkes' medical file maintained by DOC are being produced herewith;
- DOC Incident reports and documents pertaining to the events of 3. November 14, 2004;
- State of Delaware Department of Health and Human Services Certificate 4. of Death and Autopsy Report.

State Defendants reserve their rights, pursuant to Rule 26(e) to identify additional State Defendants further reserve the right to identify and utilize any documents. document listed by the Plaintiff.

#### (C) Experts and their opinions: Damage Computation.

State Defendants have not yet retained any experts, but reserve the right to do so, and will supplement this response as required by Rule 26(a).

#### (D) Insurance Agreements in force:

None. State Defendants further disclose that no such insurance exists.

#### (E) Basis for any damages claimed:

State Defendants have filed a counter-claim for damages. The State of Delaware Department of Correction and Defendant, First Correctional Medical-Delaware, L.L.C./FCM Inc. (FCM), were parties to a contract for the provision of medical services to the Delaware Department of Correction's inmate population, applicable and effective during November, 2004, and at all relevant times to this action. Pursuant to the terms of that contract, FCM is liable for defense and indemnification of damages assessed against the State and State Defendants (if any) under the "hold harmless" provision. In the alternative, State Defendants are entitled to common law indemnification by FCM.

### STATE OF DELAWARE DEPARTMENT OF JUSTICE

/s/ Stephani J. Ballard
Stephani J. Ballard, I.D. #3481
Deputy Attorney General
820 North French Street, 6<sup>th</sup> Floor
Wilmington, Delaware 19801
(302)577-8400

Attorney for State Defendants

Dated: September 26, 2006

#### IN THE UNITED STATES DISTRICT COURT

#### FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et al.	)	
Plaintiffs,	)	
I IMPROVED TO	)	
<b>v.</b>	j	C. A. No. 06-104-JJF
	)	
FIRST CORRECTIONAL	)	
MEDICAL, INC.,	)	
STANLEY TAYLOR, et al.,	)	
	)	
Defendants.	)	

#### NOTICE OF SERVICE

The undersigned certifies that on September 26, 2006, she caused the STATE DEFENDANTS' RULE 26(a) DISCLOSURES to be delivered to the following persons in the form and manner indicated:

#### NAME AND ADDRESS OF RECIPIENT(S):

Jeffrey K. Martin, Esquire Margolis Edelstein 1509 Gilpin Ave. Wilmington, DE 19806 Dana Spring Monzo, Esquire McCullough & McKenty 1225 N. King St., Ste. 1100 P.O. Box 397 Wilmington, DE 19899-0397

#### MANNER OF DELIVERY:

X Two true copies by first class mail, postage prepaid, to each recipient

STATE OF DELAWARE DEPARTMENT OF JUSTICE

/s/ Stephani J. Ballard
Stephani J. Ballard, I.D. #3481
Deputy Attorney General
Carvel State Office Building
820 N. French Street, 6<sup>th</sup> Floor
Wilmington, DE 19801
(302) 577-8400
Attorney for State Defendants

### IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et. al

Plaintiffs,

C.A. No. 06-104(JJF)

v

JURY TRIAL DEMANDED

FIRST CORRECTIONAL MEDICAL, INC., STANLEY TAYLOR, et. al

Defendants.

#### PLAINTIFFS' RULE 26(a)(1) INITIAL DISCLOSURES

Plaintiffs, Karen Barkes, et. al., by and through their undersigned attorney, hereby exchanges the following Pre-Discovery Disclosures, pursuant to Fed. R. Civ. P. 26(a)(1).

#### RESERVATIONS

1. Plaintiff's Initial Disclosures are made without waiver of, or prejudice to, any objections Plaintiffs may have. Plaintiffs expressly reserves all objections, including, but not limited to: (a) relevance; (b) attorney-client privilege; (c) work-product protection; (d) any other applicable privilege or protection under federal or state law; (e) undue burden; (f) materiality; (g) overbreadth; (h) the admissibility in evidence of these Initial Disclosures of the subject matter thereof; and (i) producing documents containing information disclosed or transmitted to any state or federal agency, to the extent such information is confidential and not required to be disclosed under applicable law. All objections are expressly preserved, as are Plaintiffs' right to move for a protective order. Plaintiffs reserve the right to retract any inadvertent disclosures of information or documents that are protected by the attorney-client privilege, the work product doctrine or any other applicable protection.

- 2. Plaintiffs has not completed their investigation of this case and reserve the right to clarify, amend, modify, or supplement the information contained in these Initial Disclosures if and when it obtains supplemental information, to the extent required by the Federal Rules of Civil Procedure.
- 3. Plaintiffs' Initial Disclosures are made subject to and without limiting any of the foregoing.

## **INITIAL DISCLOSURES**

I. The name and, if known, the address and telephone number of each individual likely to have discoverable information relevant to disputed facts alleged with particularity in the pleadings, identifying the subjects of the information.

## ANSWER:

- 1. Karen Barkes, 3111 Crystal Court, Wilmington, DE 19810.
- 2. Tina Grossman, 21 Hilton Road, Wilmington, DE 19810.
- Stanley Taylor, Chief Officer of the Department of Corrections, 245
   McKee Road, Dover, Delaware 19904; Commissioner of Corrections for the State of Delaware.
- Raphael Williams, Warden of the Howard R. Young Correctional Facility,
   1301 East 12<sup>th</sup> Street Wilmington, DE 19801.
- John Polk, Department of Corrections, 245 McKee Road, Dover,
   Delaware 19904.

- 6. Dorene Fields, Department of Corrections, 245 McKee Road, Dover, Delaware 19904.
- Stephen Martelli, Department of Corrections, 245 McKee Road, Dover,
   Delaware 19904.
- Sandra Payne, Department of Corrections, 245 McKee Road, Dover,
   Delaware 19904.
- 9. Fred Way, Department of Corrections, 245 McKee Road, Dover, Delaware 19904.
- 10. Paul Howard, Bureau Chief of the Department of Corrections, 245 McKee Road, Dover, Delaware 19904.
- Frederick Villars, M.D., Wilmington Hospital, 501 West 14<sup>th</sup> Street,
   Wilmington, DE 19801.
- 12. Perry Phelps; Department of Services for Children, Youth and Their Families, 1825 Faulkland Road, Wilmington, DE 19805-1195.
- Jennie Vershvovsky, Assistant Chief Medical Examiner, 200 South
   Adams Street, Wilmington, DE 19801.
- 14. Mariam Mammen, M.D., Wilmington Hospital, 501 West 14<sup>th</sup> Street, Wilmington, DE 19801.
- Debbie L. Fitzgerald, a nurse at Christiana Care, Department of
   Psychiatry, 501 West 14<sup>th</sup> Street, Wilmington, DE 19801.
- Anita Matos, a nurse at Christiana Care, , Department of Psychiatry, 501
   West 14<sup>th</sup> Street, Wilmington, DE 19801

- 17. Gaber Yaccub, M.D., Rockford Center, 100 Rockford Drive, Newark, DE 19713.
- 18. Alex Jacobsen, M.D., Rockford Center, 100 Rockford Drive, Newark, DE19713.
- Tracy D. Frazier, associate with David Kalkstein, MD, Ph.D, and
   Associates, 3411 Silverside Road, Hagley Building, Suite 102, Wilmington, DE 19810.
- 20. Erin E Chudzik-Pryor, an EMT with New Castle County, New Castle County Government Center, 87 Reads Way, New Castle, DE 19720.
- 21. Aaron M. Tarpine, , an EMT with New Castle County, New Castle County Government Center, 87 Reads Way, New Castle, DE 19720.
- Arthur T. Pastorius, BS,CAC, Mermont Treatment Center, 100 Yearsley
   Mill Road, Lima, PA 19063-5593.
- 23. Joseph A Mallory, CA, Mermont Treatment Center, 100 Yearsley Mill Road, Lima, PA 19063-5593.
- 24. Laynette Graves, CA, Mermont Treatment Center, 100 Yearsley Mill Road, Lima, PA 19063-5593.
- 25. Carolyn Wolf, CA, director of PSI Day Treatment Center, WoodmillDrive, Suite 34, Wilmington, DE 19808
- II. A copy of, or a description by category and location of, all documents, data compilations, and tangible things in the possession, custody, or control of the parties that are relevant to disputed facts alleged with particularity in the pleadings.

## **ANSWER:**

- 1. Any and all medical records from First Correction Medical from November 14, 2004.
- 2. Any and all medical records from Christiana Care Health Services from November 14 and on and immediately prior to November 14, 2004.
- Any and all medical records while under treatment of David Kalkstein,
   M.D., Ph.D.
  - 4. Any and all medical records from Mirmont Treatment Center.
- Any and all medical records from Christiana Care Health Services from September 10, 2004.
  - 6. Any and all medical records from stays at Rockford Center.
- 7. Any and all medical records while under care of PSI Day Treatment Program.
- 8. Any and all medical records from various visits to the Emergency Room at Christiana Care Health Services facilities.
- 9. Any and all medical records from Christiana Care Health Services while under care of Frederick Villars, M.D.
- III. A computation of any category of damages claimed by the disclosing parties, making available for inspection and copying as under Rule 34 the documents or other evidentiary material, not privileged or protected from disclosure, on which such computation is based, including materials bearing on the nature and extent of injuries suffered.

## ANSWER:

To be provided at a later date.

IV. For inspection and copying as under Rule 34 any insurance agreement under which any person carrying on an insurance business may be liable to satisfy part or all of a judgment which may be entered in the action or to indemnify or reimburse for payments made to satisfy the judgment.

## ANSWER:

Not applicable.

#### MARGOLIS EDELSTEIN

Jeffrey K. Martin, Esquire (Del. Bar #2407) 1509 Gilpin Avenue Wilmington, DE 19806 (302) 777-4680 (302) 777-4682 fax jmartin@margolisedelstein.com Attorney for Plaintiffs

Dated: November 10, 2006

## IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et. al

Plaintiffs,

C.A. No. 06-104(JJF)

**JURY TRIAL DEMANDED** 

FIRST CORRECTIONAL MEDICAL, INC., STANLEY TAYLOR, et. al

Defendants.

## **CERTIFICATE OF SERVICE**

I hereby certify that on November 10, 2006 I electronically filed the attached Plaintiffs' Pre-Discovery Disclosures with the Clerk of the Court using CM/ECF which will send notification of such filing to the following attorneys of record below:

Stephani J. Ballard, Esquire Deputy Attorney General 820 North French Street, 6th Floor Wilmington, DE 19801

Dana M. Spring-Monzo, Esquire McCullough & McKenty,PA. 1225 King Street Suite 100 P.O. Box 397 Wilmington, DE 19899-0397

MARGOLIŞ EDELSTEIN

Jeffred K. Martin, Esquire (Del Bar #2407)

1509 Gilpin Avenue Wilmington, DE 19806

(302) 777-4680

(302) 777-4682 (fax)

Attorney for the Plaintiff

## IN THE UNITED STATES DISTRICT COURT

## FOR THE DISTRICT OF DELAWARE

KAREN BARKES, individually;	)
TINA GROSSMAN as next friend of	)
BRITTANY BARKES; TINA	)
GROSSMAN as next friend of	)
ALEXANDRA BARKES; and	)
KAREN BARKES as administratrix	)
of the ESTATE OF CHRISTOPHER	)
BARKES,	) C. A. No. 06-104-JJF
	)
Plaintiffs,	)
	)
<b>v.</b>	)
	)
FIRST CORRECTIONAL MEDICAL	)
INC.; STANLEY TAYLOR;	)
RAPHAEL WILLIAMS;	)
CERTAIN UNKNOWN INDIVIDUAL	)
EMPLOYEES OF STATE OF	)
DELAWARE DEPARTMENT OF	)
CORRECTION; CERTAIN	)
UNKNOWN INDIVIDUAL	)
EMPLOYEES OF FIRST	)
CORRECTIONAL MEDICAL, INC.,	)
And STATE OF DELAWARE,	)
DEPARTMENT OF CORRECTION,	)
	)
Defendants.	)

# PLAINTIFFS' RESPONSES TO STATE DEFENDANTS' FIRST SET OF INTERROGATORIES

<u>INTERROGATORY NO. 1:</u> To the extent you contend that a State Defendant violated the Plaintiffs' or decedent's clearly established constitutional rights, state with particularity and specificity as to each defendant the factual basis for your

contention, and identify all individuals with knowledge, documents or tangible physical evidence that support your contentions.

## **RESPONSE:**

- 1) Raphael Williams was Warden of the Howard R. Young Correctional Institution when Christopher Barkes was previously incarcerated and attempted suicide. He is responsible for the welfare of all inmates during their stay at HRYCI.
- 2) Department of Correction is responsible for all incarcerated inmates at HRYCI. Upon information and belief, DOC failed to provide constant supervision and placed Christopher Barkes in a single cell with bedding and/or other items that could be used by a suicidal inmate to harm himself.
- 3) Further discovery is needed to determine the extent of the violations and the identities of the violators.

<u>INTERROGATORY NO. 2:</u> Describe in detail the circumstances, including the date, manner and location, surrounding prior alleged suicide attempts by Christopher Barkes referenced in your Complaint as follows:

- (a) paragraph #15 of your Complaint, referencing a suicide attempt by Barkes in November of 2003;
- (b) paragraph #16 of your Complaint, referencing an alleged additional suicide attempt by Barkes while he was incarcerated at Howard R. Young Correctional Institution (HRYCI);
- (c) paragraph #18 of your Complaint, referencing an alleged additional suicide attempt by Barkes on September 10, 2004, at Christiana Hospital;
- (d) As to the alleged 9/10/04 attempt referenced in paragraph #18, please also identify the names of the "probation officers" whom you allege were "notified" of this attempt, and the date(s) and manner of notification;

(e) please identify any other prior suicide attempts by Christopher Barkes of which you are aware.

- (a) In November 2003, Christopher Barkes was staying with his Aunt Helen Young at 14 Ruby Drive in Claymont, DE. Plaintiff Karen Barkes had talked to him a few times during the day. Decedent was depressed over his recent drug use and stated that he saw no end to the pain that he felt over his mistakes in his life. He took a number of prescription pills that he had and called his father, Raymond Barkes. Raymond Barkes then called the ambulance and Aunt Helen. Decedent was then taken by ambulance to Wilmington Hospital where his stomach was pumped. He was admitted for being suicidal.
- (b) Decedent was serving time at Gander Hill for the accident in 1997. He collected a number of pills until he got enough that he thought would kill him. Decedent was then taken to St. Francis Hospital where he stayed four (4) days before going back to Gander Hill.
- (c) On September 10, 2004, Decedent was found by a probation officer at a friend's house in an intoxicated condition. He was taken to Wilmington Hospital because of his breathalyzer reading. While they were waiting for treatment, Decedent tried to hang himself with a sheet and IV tubing. Decedent was admitted to the Rockford Center for being suicidal.
- (d) Decedent tried to overdose on an unknown illegal drug to kill himself. He made a statement to Plaintiff Karen Barkes about not being worthy to be alive when two (2) people were dead because of his mistake. When he became

unconscious, Karen Barkes called 911. The police and an ambulance revived him and took him to the hospital.

(e) Unaware of any others except those documented above.

INTERROGATORY NO. 3: Describe in detail the incident(s) surrounding a domestic altercation between Christopher Barkes and his wife, Karen Barkes, on or about November 21, 2003, that led to Christopher Barkes entering a guilty plea, on or about December 17, 2003, to a charge of offensive touching.

## **RESPONSE:**

After Decedent's first hospitalization at Rockford, he was prescribed Zoloft. He was complaining about feeling like "jumping out of his skin", "like [he] could climb the walls", and feeling highly manic. Decedent called the doctor who told him to keep taking the Zoloft. He had tried to drink alcohol to bring himself "down" from the Zoloft. Decedent began arguing with his wife. As Karen Barkes was trying to get him to agree to go back to the hospital, he open-hand slapped Karen Barkes across the face. Karen Barkes called the police hoping police could help her get Decedent to the hospital.

INTERROGATORY NO. 4: Describe in detail the incident(s) surrounding a domestic altercation between Christopher Barkes and his wife, Karen Barkes, on or about January 29, 2004, that led to Christopher Barkes entering a guilty plea, on or about February 17, 2004, to a charge of Assault Third Degree.

Decedent had started drinking again and he was arguing with his wife. As Karen Barkes was walking into the dining room, Decedent threw the phone striking Karen Barkes in the arm.

INTERROGATORY NO. 5: Please provide a detailed description of the activities of Christopher Barkes (including places and names of persons visited; job duties or social events attended; court or probation/parole appearances; medical appointments, if any) which took place between November 3, 2004 and November 13, 2004, inclusive. Please specifically note any contacts between Christopher Barkes and any of the plaintiffs and/or his children during that time.

## **RESPONSE:**

Decedent was very involved with both of his girls' sporting events. On November 7, 2004, he went to Alexandra's volleyball game at Immaculate Heart of Mary. Tina Grossman, Decedent's former spouse, talked by phone with Decedent on Sunday, November 10, while Decedent was living with his Aunt Helen. Decedent expressed that he wanted to take the girls to Mass and to see his mother on the 14<sup>th</sup> of November, his mother's birthday.

<u>INTERROGATORY NO. 6:</u> Describe in detail the incident(s) that led to Barkes' arrest, and subsequent incarceration at HRYCI, on November 13, 2004.

On November 13, 2004, Decedent was due to arrive at Karen Barkes's home at 12 noon. Around 5 p.m., Karen Barkes got a call from Decedent stating that he was in Gander Hill.

INTERROGATORY NO. 7: Identify the name of provider, address, inclusive dates of treatment, and whether inpatient or outpatient, as to any hospitalizations, and/or medical, psychological, psychiatric, detoxification or counseling treatment of Christopher Barkes for issues pertaining his use or abuse of drugs and/or alcohol, at any point during his life.

## **RESPONSE:**

Doctor's: Dr. Privit and Tracy Frazer from Kalkstein Associates

Rehabilitation Centers: Mirimont; 100 Yearsley Road, Media, PA 18101

Net Detox 3315 Kirkwood Highway, Wilmington, DE 19808

**North East Treatment Centers** 

**Outpatient Facilities:** 

Open Door

Catholic Charities

**PSI** 

Hospitals:

Rockford Center, 100 Rockford Drive, Newark, DE

Meadowood, 575 South DuPont Highway, New Castle, DE

19720

Christiana Care's Wilmington Hospital

INTERROGATORY NO. 8: Identify the name, address, medical specialty and practice group (if any), of all physicians who were actively treating Christopher Barkes as of November 13, 2004, including, but not limited to, specific identification of those physicians who prescribed the medications you identify at paragraph #20 of your Complaint, and the conditions or diagnoses for which these medications were prescribed to Barkes. Please also identify the name and address of all pharmacies where Christopher Barkes would have filled prescriptions within 2 years prior to November 13, 2004.

## **RESPONSE:**

Pharmacies included: Target, 1050 Brandywine Blvd. Wilmington, DE 19810

Shoprite, 1300 Rocky Run Parkway, Wilmington, DE 19810

Medco Pharmacies – a mail-order pharmacy

INTERROGATORY NO. 9: Describe in detail the factual bases for your allegations in paragraphs 24, 26 and 27 that, as of November 13, 2004, upon his admission to HRYCI, Christopher Barkes was manifesting any suicidal ideations or threats, or otherwise indicating that he was, at that time, at risk for suicide. As part of your answer, please specifically describe what behavior(s) (if any) by Christopher Barkes should have alerted State Defendants and/or defendant FCM that suicide precautions should have been taken as to Barkes upon his admission to HRYCI.

#### **RESPONSE:**

(

The police report stated that Decedent was in the cell alone. Plaintiff will supply further responses upon receipt of discovery response from Defendants.

INTERROGATORY NO. 10: Please provide the names, last known addresses and phone numbers of any family, friends, coworkers or other acquaintances of Christopher Barkes who had witnessed any suicidal behavior, ideation or threats of suicide by Barkes, and describe in detail the circumstances and the behavior of Barkes observed by each.

## **RESPONSE:**

Helen Young (Decedent's aunt) 14 Ruby Drive, Claymont, DE 19703

Raymond Barkes (Decedent's father) 5952 Maury Avenue, Woodland Hills, CA

91367

Helen Young was with Decedent when he attempted the suicide attempt with pills.

Decedent had called his father Raymond and spoke to him after taking the pills

INTERROGATORY NO. 11: Please provide the names, last known addresses and phone numbers of any family, friends, coworkers or other acquaintances of Christopher Barkes who had witnessed problematic use or abuse of alcohol and/or drugs (prescription or non-prescription) by Barkes, and describe in detail the circumstances and the behavior of Barkes observed by each.

## **RESPONSE:**

Scott Herr, South Avon Drive, Claymont, De 19703. Scott was a friend of Decedent who talked to him about Decedent's drug/alcohol problem. They discussed Decedent's mental health issues and guilt over the accident.

INTERROGATORY NO. 12: Identify any and all drugs, narcotics, prescriptions, and medications (whether legal or illegal) Barkes has used in the past, or was using prior to his November 13, 2004 incarceration; please note specifically any substances as to which Barkes was diagnosed with and/or treated for addiction.

## RESPONSE:

Illegal: pot, cocaine, and opiates

Legal: Lexapro, Zoloft, Flexeril, Zyrtec, Patenol. Flonase, Effexor, Seroquil, and

Depakote

INTERROGATORY NO. 13: Please describe in detail any alleged mental, emotional, psychological, behavioral and/or substance abuse problems Barkes was ever diagnosed with or treated for; identify the date on which either you or Barkes became aware of such information; identify all persons having knowledge of such information including any treating doctors, psychologist or psychiatrists; provide the nature of any diagnosis or prognosis rendered; and identify all documents referring or relating to such information.

## **RESPONSE:**

See previously provided information in interrogatory #7.

INTERROGATORY NO. 14: Please describe in detail any alleged mental, emotional, psychological, behavioral and/or substance abuse problems *any* plaintiff (including minor children) has ever been diagnosed with or treated for; identify all persons having knowledge of such information including any treating doctors,

psychologist or psychiatrists; provide the nature of any diagnosis or prognosis rendered; and identify all documents referring or relating to such information.

## **RESPONSE:**

Straight, Inc. in Springfield, VA (no longer exists) November 1984 to November 1986 for drug and alcohol abuse

Therapist: Jane Anderson for treatment for PTSD

## **INTERROGATORY NO. 15:** Identify:

- a. any and all places where Christopher Barkes actually resided from December 12, 1984 to November 13, 2004, with dates of residence as to each; and
- b. for every residence provided in subparagraph (a) provide the names and present addresses of all person(s) with whom Barkes resided;
- c. Please identify specifically where Christopher Barkes actually resided (whether or not considered a "permanent" address) as of November 12, 2004.

#### **RESPONSE:**

(a) 1984-1987: 5952 Maury Avenue, Woodland Hills, California 91367 with his parents and 4-5 siblings;

1987-1989: 14 Ruby Court, Claymont, DE 19703, with his Uncle Tom and Aunt Helen.

1989-1991: 914 Governor Circle, Wilmington, DE 19809 with his wife Tina and their daughter, Brittany Barkes. 1991-1995: 118 Homewood Road, Wilmington, DE 19803 with Tina, and daughters, Brittany and Alexandra.

1995-1996: no place in particular.

1996-1999: incarcerated for 2.5 years

1999-2002: 14 Ruby Court, Claymont, DE 19703, with his Aunt Helen.

2002-2004: 3111 Crystal Court, Wilmington, DE 19810 with Karen

Barkes, Brittany Barkes, and Alexandra Barkes (part time)

- (b) included in above.
- (c) 14 Ruby Drive, Claymont, DE 19703

INTERROGATORY NO. 16: Identify the dates of marriage and names of spouse(s), as to all marriages by Christopher Barkes; date(s) of divorce, or separation, if any, and the names and birth dates of all children arising out of the marriage(s). Please also identify the names, addresses, birth dates and mothers' names and addresses, of all children of Christopher Barkes in addition to those arising out of his marriage(s).

- 1) April 28, 1989 married Tina Marie Grossman; divorced in March 1996. Daughter Brittany Ann was born August 30, 1989 and daughter Alexandra Marie was born March 9, 1993.
  - 2) April 5, 2003 Christopher Barkes married Karen Undercuffle.

INTERROGATORY NO. 17: State and identify all compensatory, statutory, punitive, and future damages, including both general and special damages, that each specific Plaintiff claims as a result of the Defendants' alleged conduct and include the basis for your calculations of those amounts, if any.

#### **RESPONSE:**

To be provided at a later date.

INTERROGATORY NO. 18: Identify all employment Christopher Barkes had in the fifteen (15) years prior to his death, including the name and address of each employer, name of supervisor, dates of employment, rate of pay, job title and responsibilities, and reason for termination.

## **RESPONSE:**

1989 to 1993: Sears, Market Street, Wilmington, DE; sales person.

September 1993 to April 1994: St. Francis Hospital, Wilmington, DE; registered nurse

February 1995 to January 1996: Microntronix, Claymont, DE; Sales Manager

January 1996: Leader Nursing and Rehabilitation Center, Wilmington, DE: charge nurse

1999 (dates unknown): Grotto's Pizza, Wilmington, DE; pizza maker

2000 (dates unknown): Big Sky Bakery, Marsh Road, Wilmington, DE; baker at \$10.50/hr.

2004 (dates unknown): Pepsi Cola Company; Northeast Blvd. Wilmington, DE.

INTERROGATORY NO. 19: Describe in detail the contributions that Christopher Barkes gave to support any plaintiff, or minor child of Barkes, prior to November 13, 2004, and identify any and all documents that evidence these contributions.

## **RESPONSE:**

Christopher Barkes paid minimum child support, but often was in arrears.

The full amount was never recalled.

INTERROGATORY NO. 20: Describe in detail the mental anguish that any individual plaintiff alleges to have suffered as a result of the death of Christopher Barkes, and identify any and all documents that support your allegation that the responding plaintiff(s) have suffered mental anguish.

#### RESPONSE:

Since her husband's death, Karen Barkes has suffered emotional distress over losing her husband. Decedent had been her major support emotionally. The first year after his death, Karen Barkes was in a state of shock. Karen Barkes was unable to motivate herself to get out of bed or take care of her basic needs, such as bathing or eating. Ms. Barkes was unable to maintain focus to perform simple tasks, such as taking out the trash, cleaning the house, or paying bills. Her job suffered because she became unable to deal with the responsibility of showing up for

work. As Karen Barkes entered the second year after her husband's death, Karen Barkes started coming out of the shock and the amount of stress from the emotional toll which caused her to be hospitalized because of stress migraines. Some days she would be forced into a dark room because of the migraines. Karen Barkes had never had headaches before, let alone migraines. Since her husband's death, Karen Barkes still has trouble focusing. It is still difficult to keep up with the basic needs of running a house by herself. Decedent's daughters have also suffered emotional trauma from the loss of their father.

INTERROGATORY NO. 21: Identify each person you have retained or employed to provide expert testimony in this action or whom you intend to call as an expert witness at the trial of this matter and state the subject matter on which such expert is expected to testify, the substance of the facts and opinions to which such expert is expected to testify and a summary of the grounds for each opinion. Please identify any documents prepared by the expert(s) with regard to this case to date.

## **RESPONSE:**

To be provided at a later date.

MARGOLIS EDELSTEIN

/s/Jeffrey K. Martin, Esquire
Jeffrey K. Martin, Esquire
(DE Bar #2407)
Margolis Edelstein
1509 Gilpin Avenue
Wilmington, DE 19806
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(302) 777-4682 (fax)
jmartin@margolisedelstein.com

Dated: February 23, 2007

Case 1:06-cv-00104-JJF

Document 33

Filed 02/23/2007

Page 1 of 1

## IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, individually;	)	
TINA GROSSMAN as next friend of	)	
BRITTANY BARKES; TINA	)	
GROSSMAN as next friend of	)	
ALEXANDRA BARKES; and	)	
KAREN BARKES as administratrix	)	
of the ESTATE OF CHRISTOPHER	)	
BARKES,	)	C. A. No. 06-104-JJF
Plaintiffs,	)	
v.	)	
FIRST CORRECTIONAL MEDICAL	)	
INC.; STANLEY TAYLOR;	)	
RAPHAEL WILLIAMS;	)	
CERTAIN UNKNOWN INDIVIDUAL	)	
EMPLOYEES OF STATE OF	)	
DELAWARE DEPARTMENT OF	)	
CORRECTION; CERTAIN	)	
UNKNOWN INDIVIDUAL	)	
EMPLOYEES OF FIRST	)	
CORRECTIONAL MEDICAL, INC.,	)	
And STATE OF DELAWARE,	)	
DEPARTMENT OF CORRECTION,	)	
	)	
Defendants.	)	

## CERTIFICATE OF SERVICE

I, Jeffrey K. Martin, hereby certify that on Friday, February 23, 2007, a copy of

Plaintiff's Responses to Defendant's First Set of Interrogatories were served by hand delivery

on the following:

Stephani J. Ballard Deputy Attorney General 820 N. French Street, 6<sup>th</sup> Floor Wilmington, DE 19801

MARGOLIS EDELSTEIN

/s/ Jeffrey K. Martin, Esquire

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jmartin@margolisedelstein.com
Attorneys for Plaintiff

Dated: February 23, 2007

## IN THE UNITED STATES DISTRICT COURT

## FOR THE DISTRICT OF DELAWARE

KAREN BARKES, individually;	)
TINA GROSSMAN as next friend of	)
BRITTANY BARKES; TINA	)
GROSSMAN as next friend of	)
ALEXANDRA BARKES; and	)
KAREN BARKES as administratrix	)
of the ESTATE OF CHRISTOPHER	)
BARKES,	) C. A. No. 06-104-JJF
	)
Plaintiffs,	)
	)
v.	)
	)
FIRST CORRECTIONAL MEDICAL	)
INC.; STANLEY TAYLOR;	)
RAPHAEL WILLIAMS;	)
CERTAIN UNKNOWN INDIVIDUAL	)
EMPLOYEES OF STATE OF	)
DELAWARE DEPARTMENT OF	)
CORRECTION; CERTAIN	)
UNKNOWN INDIVIDUAL	)
EMPLOYEES OF FIRST	)
CORRECTIONAL MEDICAL, INC.,	)
And STATE OF DELAWARE,	)
DEPARTMENT OF CORRECTION,	)
	)
Defendants.	)

# PLAINTIFFS' RESPONSES TO STATE DEFENDANTS' FIRST SET OF REQUESTS FOR ADMISSIONS

1. On or about December 17, 2003, Christopher Barkes entered a guilty plea to a charge of "Offensive Touching", resulting from a domestic altercation, on or about November 21, 2003, with his wife, plaintiff, Karen Barkes.

DENIED; a Not Guilty plea was entered.

2. As part of his sentence for the 12/17/03 conviction, Christopher Barkes was placed on probation, with the condition that he have "no contact" with his wife, Karen Barkes.

#### ADMITTED.

3. As part of his sentence for the 12/17/03 conviction, Christopher Barkes was placed on probation, with the condition of "receiving substance abuse evaluation and treatment.

DENIED; condition of "receiving substance abuse evaluation and treatment" was never included.

4. As part of his sentence for the 12/17/03 conviction, Christopher Barkes was placed on probation, with the condition of "zero tolerance" for any consumption of alcohol.

## ADMITTED.

5. On or about January 29, 2004, Christopher Barkes committed a physical assault upon his wife, Karen Barkes.

#### ADMITTED.

6. At the time of the January 29, 2004 assault, Christopher Barkes was tested for alcohol consumption and found to be under the influence of alcohol.

#### ADMITTED.

7. On or about February 17, 2004, Christopher Barkes entered a guilty plea in

Family Court to a charge of Assault third degree, arising out of the January 29, 2004 assault against his wife, Karen Barkes.

DENIED; a Not Guilty plea was entered.

8. On or about March 15, 2004, Christopher Barkes was found to be in violation of an order of probation imposed as a result of the conviction for the January 29, 2004 assault against his wife, Karen Barkes.

## ADMITTED.

9. As of November 13, 2004, Christopher Barkes and his wife, plaintiff, Karen Barkes, were separated and not residing in the same home.

## DENIED; couple was not officially separated.

10. As of November 13, 2004, Christopher Barkes was subject to an order of probation imposed as a result of his conviction for a domestic-related assault against his wife, Karen Barkes, and/or his March 2004 violation of probation.

#### ADMITTED.

11. Christopher Barkes was under the influence of alcohol at the time of the March 16, 1997 motor vehicle accident, referenced at paragraphs 12-14 of the Complaint.

## ADMITTED.

12. Christopher Barkes had a history of drug and alcohol problems dating back to at least age 19 (12/12/84).

#### ADMITTED.

13. At the time of his intake assessment at HRYCI on November 13, 2004, Christopher Barkes denied any suicidal thoughts or plans.

DENIED; Decedent told intake personnel at HRYCI of his past suicide attempt and told them he was depressed.

14. At the time of his intake assessment at HRYCI on November 13, 2004, Christopher Barkes denied any history of drug or alcohol abuse to intake personnel.

DENIED; Decedent told intake personnel at HYRCI of his history of drug and alcohol abuse.

15. At the time of his intake assessment at HRYCI on November 13, 2004, Christopher Barkes was not manifesting any violent or erratic behavior.

DENIED; Decedent admitted suicidal thoughts to intake personnel at HRYCI on November 13, 2004.

16. At no time from his admission to HRYCI on November 13, 2004 until his suicide on November 14, 2004, did Christopher Barkes display any violent or erratic behavior.

DENIED; Decedent refused to take a shower and had flat affect (a warning sign of

## suicide) at the time he was admitted.

17. Following Barkes' intake at HRYCI on November 13, 2004, an order was issued for a "routine" referral to Mental Health Services, due to Barkes' past psychiatric history. (See Defendants' initial disclosures, Bates page D00040).

DENIED; a referral was written, but this referral was never acted upon.

## MARGOLIS EDELSTEIN

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Jeffrey K. Martin, Esquire (DE Bar #2407)
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Dated: February 23, 2007

Case 1:06-cv-00104-JJF

Document 35

Filed 02/23/2007

Page 1 of 1

## IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, individually;	)	
TINA GROSSMAN as next friend of	)	
BRITTANY BARKES; TINA	)	
GROSSMAN as next friend of	)	
ALEXANDRA BARKES; and	)	
KAREN BARKES as administratrix	)	
of the ESTATE OF CHRISTOPHER	)	
BARKES,	)	C. A. No. 06-104-JJF
Plaintiffs,	)	
<b>v.</b>	)	
FIRST CORRECTIONAL MEDICAL	)	
INC.; STANLEY TAYLOR;	)	
RAPHAEL WILLIAMS;	)	
CERTAIN UNKNOWN INDIVIDUAL	)	
EMPLOYEES OF STATE OF	)	
DELAWARE DEPARTMENT OF	)	
CORRECTION; CERTAIN	)	
UNKNOWN INDIVIDUAL	)	
EMPLOYEES OF FIRST	)	
CORRECTIONAL MEDICAL, INC.,	)	
And STATE OF DELAWARE,	)	
DEPARTMENT OF CORRECTION,	)	
	)	
Defendants.	)	

## **CERTIFICATE OF SERVICE**

I, Jeffrey K. Martin, hereby certify that on Friday, February 23, 2007, a copy of

Plaintiff's Responses to Defendant's First Set of Admissions were served by hand delivery on the

following:

Stephani J. Ballard Deputy Attorney General 820 N. French Street, 6<sup>th</sup> Floor Wilmington, DE 19801

MARGOLIS EDELSTEIN

/s/ Jeffrey K. Martin, Esquire

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jmartin@margolisedelstein.com
Attorneys for Plaintiff

Dated: February 23, 2007

## IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES individually; TINA	<b>)</b>
GROSSMAN as next	)
friend of BRITTANY BARKES; TINA	)
GROSSMAN as next friend of ALEXANDRA	j
BARKES; and KAREN BARKES as administratrix	()
of the ESTATE OF CHRISTOPHER BARKES,	j ·
· ·	)
Plaintiffs,	)
	Ś
V.	) C.A. No. 06-104 JJF
	)
	)
FIRST CORRECTIONAL MEDICAL,	) JURY TRIAL DEMANDED
INC.; STANLEY TAYLOR; RAPHAEL	)
WILLIAMS; CERTAIN UNKNOWN	)
INDIVIDUALEMPLOYEES OF THE STATE OF	)
DELAWARE DEPARTMENT OF	)
CORRECTION; CERTAIN UNKNOWN	)
INDIVIDUAL EMPLOYEES	)
OF FIRST CORRECTIONAL MEDICAL,	)
INC.; and STATE OF DELAWARE	)
DEPARTMENT OF CORRECTION,	)
	) .
Defendants.	)

# STATE DEFENDANTS RESPONSES TO PLAINTIFFS! FIRST SET OF INTERROGATORIES

1. Has the State of Delaware or any representative of the State of Delaware indicated to You that the State of Delaware will indemnify you for any judgment entered against You in this case? If Your answer is "yes", please describe the scope of such indemnification, including the manner in which it is limited in any fashion (for example, if there is a limitation with regard to punitive damages.)

## ANSWER:

Objection. This question is outside the scope of permissible interrogatory under F.R.C.P. 33 as it calls for legal analysis and conclusions. The question further is not reasonably calculated to lead to the discovery of admissible evidence and calls for information which is protected by attorney-client privilege. F.R.C.P. 26(b).

- 2. Identify by name and SBI number all inmates taken in on November 13, 2004 between 9:00 AM and 12:00 PM and for each inmate so identified please state:
- (a) whether such inmate remains incarcerated, and if still incarcerated provide the anticipated date of release and the institution in which the inmate is currently incarcerated;
- (b) if such inmate is no longer incarcerated, the date of release, the current address of the inmate, and the probation status of the inmate (if applicable) and;
- (c) whether such inmate was interrogated with regard to his knowledge.

## **ANSWER:**

Please see inmate Admittance Report, 11/13/04-11/14/04, produced as part of Defendants' Responses to Plaintiff's Requests for Production, Bates Stamp # D00384. Barkes was not committed as an "inmate" assigned to HRYCI, at the time of his admission to the facility on Saturday, November 13, 2004 on an administrative warrant, but was being held at HRYCI on a temporary basis, pending a transfer to Sussex VOP Center, which would have occurred on Monday, November 15, 2004. Therefore, his name does not appear on the Admittance Report.

- 3. Identify by name, rank, and job title, all employees of the DOC and any subcontractors including First Correctional Medical ("FCM") with responsibility for the "initial intake" of prisoners on November 13 and 14, 2004 at Howard R. Young Correctional Institute ("HRYCI") and for each such individual identified please state:
  - (a) whether he or she is still employed by the DOC;
  - (b) if not employed by the DOC, the person's home address;
  - (c) which employees had what responsibilities, and;
  - (d) which employees had any contact with and/or responsibility for Christopher Barkes.

#### ANSWER:

As to DOC (State of Delaware) employees, DOC staffing records show that the following officers worked in the Booking and Receiving area on the dates in question:

November 13, 2004: CO Mark Saunders; CO Valentino Thorne; Cpl. Christopher Chappel; CO Mark Bullock; CO Dorene Fields; CO Brian Emig; Cpl. Brian Forte; CO Kenneth Matthews; CO Lyle Bryant; CO Wayne Dial.

November 14, 2004: Cpl. Kimphus Daniels; Cpl. Benny Dotson; CO Mark Bullock; CO Denisha Young; CO Scott Ivy; Cpl. Sandra Rayne; CO Stephen Martelli; CO Dorene Fields; CO Wayne Dial; CO Michael Fields; CO Bernard Smith. (See staffing/shift logs, 11/13/04-11/14/04, produced as part of Defendants' Responses to Plaintiff's Requests for Production, Bates Stamp # D00385-D00455.)

All of the above officers still work for DOC except for CO Scott Ivy (now a New Castle County Police Officer) and CO Mark Saunders (now a Camden County NJ Police Officer). All others still work at HRYCI, except for CO Dorene Fields who now works at

Plummer Community Corrections, and Cpl. Rayne now works at Baylor Women's facility.

According to incident reports previously produced, COs Dorene Fields and Sandra Rayne had spoken to inmate Barkes shortly before his suicide. CO Martelli, making lunch rounds, found Barkes hanging in his cell, unresponsive, and attempted rescue efforts. It is not known which CO(s) took Barkes' intake information upon his admission to the facility on November 13, 2004, however his intake occurred during the 0800-1600 shift.

To the extent "initial intake" of detainees involves medical assessments, Health Care workers at DOC facilities, including HRYCI, were/are not employees or "subcontractors" of DOC, but rather were, at all relevant times, solely employed by, and responsible to, the contracted Health Care Provider, FCM. State Defendants are without knowledge as to the requested information as to employees of FCM, except to the extent noted in the State's responses to Initial Disclosures, including incident reports. Upon information and belief, the information sought by this interrogatory is in the possession of Defendant, FCM.

4. Explain in detail, any and all procedure(s) in effect on November 13 and 14, 2004 for processing an inmate into the HRYCI.

#### ANSWER:

Please see Policy Number 60.04, SOP on "Admissions," produced as part of Defendants' Responses to Plaintiff's Requests for Production, Bates Stamp # D00457-D00460. Barkes was not committed as an "inmate" assigned to HRYCI at the time of his admission to the facility on November 13, 2004 on an administrative warrant, but was being held at HRYCI on a temporary basis, pending a transfer to Sussex VOP Center, which would have occurred on Monday, November 15, 2004. A full intake is not done at the "holding facility" on inmates being held on administrative warrants—for instance, they are not fingerprinted, and they are not issued prison clothing. These procedures are done after transfer to the receiving facility.

- 5. Please identify all nurses or medical personnel working at HRYCI on November 13 and 14, 2004, and for each such individual identified please state:
  - (a) whether he or she is still employed at HRYCI or FCM;
  - (b) if not employed at HRYCI or FCM, the person's home address;
  - which employees had what responsibilities; and, (c)
  - (d) whether the employee had any contact with or responsibility for Christopher Barkes.

## ANSWER:

Health Care workers, including nurses, at DOC facilities, including HRYCI, were/are not employees or "subcontractors" of DOC, but rather were, at all relevant times, solely employed by, and responsible to, the contracted Health Care Provider, FCM. State Defendants are without knowledge as to the requested information as to employees of FCM, except to the extent noted in the State's responses to Initial Disclosures, including incident reports. Upon information and belief, the information sought by this interrogatory is in the possession of Defendant, FCM.

6. Identify and explain the procedure in effect on November 13 and 14, 2004, that DOC employees and/or medical personnel at HRYCI must follow when admitting to the prison a suicidal or mentally ill inmate at "initial intake".

## ANSWER:

Objection to the extent this question suggests or presumes that the deceased Plaintiff/inmate, Christopher Barkes, was "suicidal" or "mentally ill" at the time of his intake at HRYCI on November 13, 2004. See response to Interrogatory # 4, above. A medical and mental health screening by the health care provider is part of the intake process. If the medical provider identifies any inmate as a suicide risk, that inmate is housed in the infirmary, with precautions appropriate to that inmate's conditions and needs. See also Standard Operating Procedure 190.04, regarding "Suicide Prevention," produced as Bates # D00461-D00464.

7. Identify and explain the procedure for administering prescribed medication to any inmate on November 13 and 14, 2004 once the inmate was admitted to HRYCI.

#### ANSWER:

Policies and procedures for administration of prescribed medication to inmates/detainees at HRYCI are determined by the contracted medical provider—in this case, FCM. Employees of DOC/HRYCI do not participate in the distribution of medications to inmates; this is handled solely by medical staff. Upon information and belief, at the time in question, medications were distributed to inmates, as prescribed, at least once per 8-hour shift.

- 8. Identify by name, rank, and job title, all employees of the HRYCI or FCM who accompanied Christopher Barkes's body to Christiana Hospital, and for each such individual identified please state:
  - whether he or she is still employed by the DOC or FCM; (a)
  - (b) if not employed by the DOC or FCM, the person's home address;
  - which employees had what responsibilities. (c)

## ANSWER:

and

The COs who accompanied Christopher Barkes to the hospital were Reginald Young and Gervin Cumberbatch. Both are still employed by DOC. State Defendants are not in possession of the requested information as to employees of FCM, but do not believe that any FCM employees went to the hospital with Barkes.

9. How many hours of suicide prevention training do the individuals identified in responses to Interrogatories 3, 5, and 18 have once they are employed by DOC or FCM?

#### ANSWER:

As to correctional officers (COs) employed by DOC, all COs receive initial training at the Academy on suicide prevention. This initial training is taught by the medical provider contractor; it is part of an all day training on multiple medical and psychiatric issues related to inmates, including suicide awareness and prevention. Upon information and belief, in 2004, this training was provided by mental health professionals

employed by the health care provider, FCM. The amount of time spent on this topic varies from class to class. COs also receive refresher training on suicide awareness. Refresher training is approximately 30 minutes long. Refresher training is conducted by DOC personnel but the training materials are created and/or approved by the medical contractor. Upon information and belief, as of 2004, refresher training was approximately biannual; it is now annual.

State Defendants are not in possession of responsive information as to employees of FCM. Upon information and belief, information sought by this interrogatory is in the possession of Defendant, FCM.

Prior to November, 2004, how much training was given to correctional 10. officers at HRYCI for detecting suicidal behavior?

## ANSWER:

Please see response to Interrogatory #9.

11. Approximately how much time transpired between the discovery of Christopher Barkes hanging until he was "cut down" by an HRYCI officer?

## <u> ANSWER:</u>

Upon information and belief, based upon times that appear in the records, at approximately 11:00 a.m. on November 14, 2004, Correctional Officer Dorene Fields saw Christopher Barkes lying awake on the bed in his cell. At approximately 11:35 a.m., Correctional Officer Stephen Martelli reported to Barkes' cell to deliver his lunch and found that Barkes had hung himself. Martelli, at 11:35 a.m., called for assistance, called

a "Code Red/Code 7" and immediately proceeded to release Barkes from the sheet and lower him to the floor, with the assistance of C/O Fields and C/O Sandra Rayne. Medical personnel from FCM reported to the cell at approximately 11:38 a.m. and began CPR.

Were any DOC or FCM employees aware that Christopher Barkes refused 13. to take a shower prior to his death? If so, when?

## ANSWER:

According to the incident report prepared by C/O Sandra Rayne, Rayne looked in on Barkes at approximately 10:50 a.m. on November 14, 2004, and asked him if he wanted to take a shower. Barkes said "no" and said that he "was OK." Rayne asked Barkes if he was sure he did not want a shower, and he said no again. (See Defendants' Initial Disclosures, Bates p. D04). State Defendants cannot respond to this interrogatory as to knowledge, if any, by employees of FCM.

What conditions are stated on the suicide check list at HRYCI that require 14. the intake employee to call FCM's corporate officers?

#### ANSWER:

Objection, this interrogatory is vague and appears to be directed to a party other than the answering defendants. Notwithstanding said objection, as part of the initial intake of a detainee, at the relevant time in November 2004, medical personnel from FCM would complete an "Adult Intake Mental Health Screening Form." This form was completed at Christopher Barkes' intake on November 13, 2004. The form contains 17 items, concerning mental health status, for which new intakes are to be screened.

Information is obtained from observation and questions directed to the inmate. In addition to the 17 item checklist, the form also requires the medical provider to state whether or not the inmate exhibits "Hallucinations" or "Violent Behavior or Threats." The form states that if the inmate presents with 8 or more positive mental health risk factors from the list, the Provider on call is to be notified and supervision instituted. The form speaks for itself and appears at Defendants' Initial Disclosures, Bates p. D0010. Christopher Barkes' intake form, on November 13, 2004 at 3:00 p.m., resulted in a score of only two (2) items from the list. At that time, Barkes also was given a Referral to Mental Health Services, on a "routine" urgency level, based on his past mental health history. (D0040). State Defendants are without information as to when, if ever, FCM medical providers are to call "FCM's corporate officers" in connection with a mental health screening.

What is the prescribed manner to sign one's name on a form at HRYCI? 15. ANSWER:

Objection. This question is vague and overbroad. Without waiver of said objection, there is no prescribed manner for DOC employees to sign their name(s) on an institutional form. State Defendants cannot respond to this interrogatory as to policies, if any, of FCM.

How many FCM or DOC personnel were involved in initial screening on 16. incoming inmates on November 13, 2004, and for each such individual identified, please state:

- (a) the names and current home address of each employee;
- (b) whether he or she was employed by DOC or FCM; and
- (c) what responsibilities each individual assigned.

#### ANSWER:

Please see response to Interrogatory #3, above. While several officers may work at the intake desk at HRYCI at any given time, typically, one officer will perform the initial intake of a new inmate/detainee. It is not known at this time who did the initial intake of Christopher Barkes on November 13, 2004. Barkes was not considered an "inmate" assigned to HRYCI at the time of his admission to the facility on November 13, 2004 on an administrative warrant, but was being held at HRYCI on a temporary basis, pending a transfer to Sussex VOP Center, which would have occurred on Monday, November 15, 2004.

State Defendants are not in possession of the requested information as to employees of FCM, other than to note that at least one person from FCM's medical screening staff evaluated Christopher Barkes and completed the "Adult Intake Mental Health Screening Form." (See Defendants' Initial Disclosures, Bates p. D10; D32-33). At that time, Barkes also was given a Referral to Mental Health Services, on a "routine" urgency level, based on his past mental health history. (D0040).

17. At the time of his admission to the HRYCI in November 2004, was anyone aware that Christopher Barkes tried to commit suicide by overdosing on medication while first incarcerated at HRYCI in 1997?

#### ANSWER:

Objection, this question is vague, overbroad and presumes facts not in evidence in this case. Notwithstanding said objection, the only prior suicide attempt of which medical intake personnel at HRYCI were made aware on November 13, 2004, as related by Barkes himself at intake, was an attempt by overdose in 2003. Barkes did not disclose what appear to be numerous other suicide attempts, and hospitalizations, including at least one in September 2004, that were part of his past history. Further, Barkes falsely denied a history of drug or alcohol use at intake. (D0032).

What were the three medications that Christopher Barkes was taking on 18. November 13, 2004, by whom were they prescribed, and did he continue to receive them after his admission to HRYCI on November 13, 2004?

#### **ANSWER:**

At intake, medical personnel noted that Barkes was on the following medications:

- 1. Depakote, 1500 mg.<sup>1</sup>
- 2. Effexor, 150 mg.
- 3. Seroquel, 25 mg.
- 4. Synthroid, 25 mg.

State Defendants are without knowledge of the accuracy of Barkes' self-report, or who prescribed the drug(s) to Barkes and/or whether he was actively taking them as prescribed prior to intake. On Saturday, November 13, 2004, Barkes' medical chart shows that he was prescribed, and received dosages of Effexor, Seroquel and Synthroid.

Drugs and dosages are noted as, upon information and belief, they were self-reported by Barkes and recorded by FCM medical personnel on the "Standard Intake Screening Form." (D0032).

(See D009, 12, 41). Barkes did not receive medication on Sunday November 14, 2004, as he committed suicide prior to the medical cart arriving to his cell area.

# DEPARTMENT OF JUSTICE STATE OF DELAWARE

/s/ Stephani J Ballard
Stephani J. Ballard (#3481)
Deputy Attorney General
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stephani.ballard@state.de.us
Attorney for State Defendants

Dated: March 9, 2007

# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et al.	)	
A .400	)	
Plaintiffs,	)	
	)	C. A. No. 06-104-JJF
<b>V.</b>	)	C. A. No. 00-104-JJF
FIRST CORRECTIONAL	)	
MEDICAL, INC.,	j.	,
STANLEY TAYLOR, et al.,	)	
	)	
Defendants.	)	

#### NOTICE OF SERVICE

The undersigned certifies that on March 9, 2007, she caused the STATE DEFENDANTS' RESPONSES TO PLAINTIFFS' FIRST SET OF INTERROGATORIES to be delivered to the following persons in the form and manner indicated:

Jeffrey K. Martin, Esquire Margolis Edelstein 1509 Gilpin Ave. Wilmington, DE 19806 Dana Spring Monzo, Esquire McCullough & McKenty 1225 N. King St., Ste. 1100 P.O. Box 397 Wilmington, DE 19899-0397

#### **MANNER OF DELIVERY:**

Two true copies by first class mail, postage prepaid, to each recipient and X via e-mail

STATE OF DELAWARE DEPARTMENT OF JUSTICE

Island J. Ballard Stephani J. Ballard, I.D. #3481
Deputy Attorney General
Carvel State Office Building
820 N. French Street, 6<sup>th</sup> Floor
Wilmington, DE 19801
(302) 577-8400
Attorney for State Defendants

# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES individually; TINA	)
GROSSMAN as next	)
friend of BRITTANY BARKES; TINA	)
GROSSMAN as next friend of ALEXANDRA	)
BARKES; and KAREN BARKES as administratrix	ý
of the ESTATE OF CHRISTOPHER BARKES,	)
· · · · · · · · · · · · · · · · · · ·	, )
Plaintiffs,	)
	)
v.	) C.A. No. 06-104 JJF
	)
•	)
FIRST CORRECTIONAL MEDICAL,	) JURY TRIAL DEMANDED
INC.; STANLEY TAYLOR; RAPHAEL	)
WILLIAMS; CERTAIN UNKNOWN	, )
INDIVIDUALEMPLOYEES OF THE STATE OF	)
DELAWARE DEPARTMENT OF	
CORRECTION; CERTAIN UNKNOWN	)
INDIVIDUAL EMPLOYEES	)
OF FIRST CORRECTIONAL MEDICAL,	)
INC.; and STATE OF DELAWARE	)
DEPARTMENT OF CORRECTION,	)
	)
Defendants.	)
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#### STATE DEFENDANTS RESPONSES TO PLAINTIFFS' FIRST REQUEST FOR PRODUCTION OF DOCUMENTS

Pursuant to F.R.C.P. 34, State Defendants respond to Plaintiffs' First Request for Production of Documents as follows. Documents with Bates numbers D00152 – D00513 are produced as part of these Responses. In addition to documents identified below, other responsive documents have been previously produced by State Defendants (Bates numbers D0001 – D00151) as part of their Initial Disclosures and supplements thereto. Documents produced as part of these responses should also be considered supplemental to State Defendants' Initial Disclosures.

#### DOCUMENTS TO BE PRODUCED

 Copies of any and all photographs, videotapes, motion pictures, sketches, diagrams, plans, or other drawings taken or prepared by you or on your behalf or in your possession or available to you concerning any aspect of this litigation.

#### **ANSWER:**

A videotape was made by the Quick Response Team (QRT) at HRYCI, of response and resuscitation efforts by DOC, FCM and paramedic/EMT responders following Barkes suicide. Copies on DVD are being provided; the DVD bears Bates # D00513. A video training tape used for DOC refresher training on suicide prevention is available for review upon request.

2. Copies of all written or recorded statements or summaries or resumes of interviews taken of any person with respect to any issue in this litigation, including, but not limited to, the decedent and/or and named Defendants in this action.

#### **ANSWER:**

Objection, this Request is overbroad and calls for the production of attorney-client privileged and work product materials. Notwithstanding said objection, see Incident Reports, previously produced.

3. Copies of any and all report[s] of investigation, finding[s] of fact or result[s] of inspection, observation[s] of fact or circumstances, or any other matter relating to any aspect of this litigation.

#### ANSWER:

See response to Request # 2, above. See also Mortality Review and Autopsy Report, previously produced and produced again herein at D00363-D00383. In addition, upon information and belief, Delaware State Police conducted an investigation following

the suicide, which is a matter of protocol in inmate deaths. DOC is not in possession of any records from DSP's investigation.

4. Any report[s] by any person qualifying as an expert containing opinions and/or facts upon which such opinions are based, concerning any aspect of this litigation.

#### **ANSWER:**

To be supplied at a later date.

5. Copies of any and all document[s], writing[s], or other item[s] identified or referred to in your Answers to Interrogatories propounded by Plaintiffs which do not fall within the above request.

#### **ANSWER:**

See Bates # D00152 - D000513.

6. Copies of any and all other document[s] or things in your possession or available to you in addition to those items specified in the foregoing requests which are or may be relevant to any issue in this litigation, including, but not limited to, issues of causation, liability and/or damage.

#### **ANSWER:**

Objection. This request is vague, overbroad and seeks production of documents which would reveal attorney mental impressions and work product. Notwithstanding said objection, all non-privileged documents known to Defendants to date, which are responsive to discovery requests and/or subject to production under Rule 26(a) have been

produced. Defendants reserve their right to supplement discovery if additional responsive documents become available.

7. Copies of any and all other document[s] or things in your possession or available to you in addition to those items specified in the foregoing requests which you intend to rely upon at trial of this matter.

#### ANSWER:

Objection. This request is vague, overbroad and seeks production of documents which would reveal attorney mental impressions and work product. See response to Request #6 above. Defendants will identify exhibits to be used at trial at the appropriate time in the pre-trial submissions.

8. Copies of forms completed by Christopher Barkes during the intake of Barkes at HRYCI in November 2004.

#### **ANSWER:**

All responsive documents in Defendants' possession were previously produced with Defendants' Initial Disclosures. Barkes was not committed as an "inmate" assigned to HRYCI at the time of his admission to the facility on Saturday, November 13, 2004 on an administrative warrant, but was being held at HRYCI on a temporary basis, pending a transfer to Sussex VOP Center, which would have occurred on Monday, November 15, 2004.

9. Any and all written procedures and/or protocols regarding intake of a new inmate and any and all forms to be completed by inmates during the intake process.

#### ANSWER:

See State Defendants' Response to Interrogatory Number 4. *See also* Policy Number 60.04, SOP on "Admissions," Bates Stamp # D00457-D00460.

10. Any and all written procedures and/or protocols regarding suicide prevention.

#### **ANSWER:**

See Standard Operating Procedure 190.04, regarding "Suicide Prevention," produced as Bates # D00461-464. See also FCM and DOC training materials for COs on suicide prevention and awareness, Bates # D00465 – 00497; D00513.

11. A full and complete copy of the Morbidity and Mortality Report issued regarding the death of Christopher Barkes.

#### **ANSWER:**

This document was previously produced with Defendants' Initial Disclosures, except that the cover page was missing from the version produced. A complete report is produced with these Responses, with Bates numbers D00363-D00383.

12. A full and complete Department of Correction record of Christopher Barkes, Inmate #361999, including his incarcerations at any DOC facilities and probationary records.

#### **ANSWER:**

All institutional and medical records not previously produced, including those pertaining to Barkes' 1997 incarceration are produced with these responses, with Bates numbers D00152 –D00365.

# DEPARTMENT OF JUSTICE STATE OF DELAWARE

/s/ Stephani J Ballard
Stephani J. Ballard (#3481)
Deputy Attorney General
820 N. French Street, 6<sup>th</sup> Floor
Wilmington, DE 19801
(302) 577-8400
stephani.ballard@state.de.us
Attorney for State Defendants

Dated: March 9, 2007

# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et. al

Plaintiffs,

C.A. No. 06-104 JJF

v.

JURY TRIAL DEMANDED

FIRST CORRECTIONAL MEDICAL, INC., STANLEY TAYLOR, et. al

:

Defendants.

#### NOTICE AND CERTIFICATE OF SERVICE

I hereby certify that on March 9, 2007, a true and correct copy of the State Defendants' Responses to Plaintiffs' First Request for Production of Documents was served upon the following counsel of record via first class mail, postage prepaid:

Jeffrey K. Martin, Esquire Margolis Edelstein 1509 Gilpin Ave. Wilmington, DE 19806 Dana M. Spring-Monzo, Esquire McCullough & McKenty,PA. 1225 King Street Suite 100 P.O. Box 397 Wilmington, DE 19899-0397

STATE OF DELAWARE DEPARTMENT OF JUSTICE

/s/ Stephani J. Ballard

Stephani J. Ballard, I.D. #3481 Deputy Attorney General Carvel State Office Building 820 N. French Street, 6<sup>th</sup> Floor Wilmington, DE 19801

(302) 577-8400

Attorney for State Defendants

Dated: March 9, 2007



DEPARTMENT OF JUSTICE NEW CASTLE COUNTY 820 NORTH FRENCH STREET WILMINGTON, DELAWARE 19801 CRIMINAL DIVISION (302) 577-8500 FAX (302) 577-2496 CIVIL DIVISION (302) 577-8400 FAX (302) 577-6630 TTY (302) 577-5783

June 4, 2007

Jeffrey K. Martin, Esquire 1509 Gilpin Ave. Wilmington, DE 19806

Re:

Barkes v. FCM, et al. C.A. No. 06-104 JJF

Dear Jeff:

JOSEPH R. BIDEN, III

ATTORNEY GENERAL

When we recently discussed the *Barkes* case, I noted that State Defendants would follow up on Plaintiff's responses to State Defendants' Interrogatories/Requests for Admission/Requests for Production, with a notification of responses which we feel are deficient or incomplete. Please consider this letter our request for additional responsive information, as detailed below, and as Defendants' attempt to informally reach agreement on a discovery dispute pursuant to Local Rule 7.1.1.

## PLAINTIFF'S RESPONSES TO INTERROGATORIES (D.I. 33)

- Interrogatory # 2(b). Please provide the date of this alleged suicide attempt at HRYCI.
- Interrogatory #6. This interrogatory requests information as to Christopher Barkes' alleged conduct which resulted in his arrest on November 13, 2004. The response simply states that Karen Barkes got a call from Christopher when he was at HRYCI, but states no facts as to how and why he got there.
- Interrogatory #7. This response does not include the requested date(s) of treatment at each facility/provider.
- Interrogatory #8: This interrogatory requests identification and information about physicians who were treating Barkes, including specifically physicians who prescribed certain medications to Barkes for diagnosed conditions. While pharmacies which would have filled prescriptions were listed, no information at all was provided responsive to the question about treating/prescribing physicians.

- Interrogatory #9: This interrogatory requests, *inter alia*, "the factual bases for your allegations in paragraphs 24, 26 and 27 that, as of November 13, 2004, upon his admission to HRYCI, Christopher Barkes was manifesting any suicidal ideations or threats, or otherwise indicating that he was, *at that time*, at risk for suicide."
  - Plaintiff's response states that further response will be supplied upon receipt of discovery responses from Defendants. State Defendants provided responses in the form of initial disclosures and records on September 26, 2006, and responses to Plaintiff's written discovery requests on March 9, 2007. Kindly supply an answer to this interrogatory at this time.
- Interrogatory #13: This interrogatory requests description and details of various medical and other conditions suffered by Barkes, including diagnoses and treatment. The reference to Response to Interrogatory #7, which is simply a listing of providers, is not responsive.
- Interrogatory #14: This requests information about medical diagnoses/treatment of the named plaintiffs. Two providers are listed, but it is not specified which plaintiff(s) treated there. An address is need for therapist, Jane Anderson. As a reminder, I am still awaiting an executed medical release for Karen Barkes herself.
- Interrogatory #15: Your response states that between 1995 and 1996, Christopher Barkes resided "no place in particular." Was he homeless? Can you be more specific with this response?

### PLAINTIFF'S RESPONSES TO REQUESTS FOR ADMISSIONS (D.I. 35)

- RFA #7: Plaintiffs' response denies that Christopher Barkes pled guilty to the referenced charges. Please refer to page D0059 in which the Court documents "Defendant's Guilty Plea."
- RFA #9: Plaintiffs' response is not responsive. The question was whether Christopher and Karen Barkes were "separated and not residing in the same home" as of the date in question. As you know, there is no "official" or "legal" separation in Delaware. Does this response remain "Denied" as to the question presented?

## PLAINTIFF'S RESPONSES TO REQUESTS FOR PRODUCTION (D.I. 34)

• Request #11: This request was for documents "related to the *investigation of Christopher Barkes' death*..." The documents referenced in Plaintiffs' response, P0730-0738, appear to be copies of letters Christopher Barkes wrote to Karen Barkes from prison. These are clearly not responsive to the question. If no responsive documents exist, please state that. If responsive documents do exist, kindly reference and/or produce them.

- Request #12: This request is for correspondence to/from Barkes while he was incarcerated. Your response is "documents do not exist." It would seem that the documents referenced at #11 are responsive to this request. Please advise.
- Request #13: This has not been responded to yet. Please respond or state if no documents exist.
- Request #15: This requests documents pertaining to Barkes' support of his children. Plaintiffs' response is "Items of emotional support may be viewed at the offices of Plaintiffs' attorney. Please describe what these "items" are so that I may determine how to proceed.
- Request #16: You were awaiting copies of tax returns from the IRS. I am assuming these have been received by now. If so, please produce copies.
- Requests # 17, 18 and 19: These requests have not yet been responded to. Please provide responsive documents if any exist.
- Request #20: Please describe the nature/contents of the "various tapes" (and whether audio, video, etc.) that are available to be "viewed" at your office. If copies of these tapes can be made for Defendants, with or without charge, please advise.

I am requesting that Plaintiffs provide amended responses to remedy the above deficiencies within 14 days of receipt of this letter. If you wish to discuss any of these items further, feel free to contact me by phone or email. Please provide any supplemental responsive information in writing, however, so the record is clear.

Very truly yours,

Stepharli J. Ballard

Deputy Attorney General

SJB/jlom

# MARTIN & WILSON, P.A.

Workplace Advocates 1508 Pennsylvania Avenue Wilmington, DE 19806

Jeffrey K. Martin, Esquire\* Timothy J. Wilson, Esquire\* Telephone: (302) 777-4681 Facsimile: (302) 777-5803

\*Licensed in DE, PA and NJ

August 6, 2007

Stephani J. Ballard, Esquire Department of Justice New Castle County 820 North French Street Wilmington, DE 19801

RE: BARKES v. FCM, et al.

C.A. NO.: 06-104 JJF

#### Dear Stephani:

I am responding to your letter of June 4, 2007 in the above-captioned matter. I regret it has taken me this long to respond to your letter. Given that your requests were in letter form, I am responding in kind. If, however, you would like these responses in a formal pleading, kindly advise.

## PLAINTIFF'S RESPONSES TO INTERROGATORIES (D.I. 33)

Interrogatory # 2(b). Please provide the date of this alleged suicide attempt at HRYCI.

#### October 31, 1997

Interrogatory # 6. This interrogatory requests information as to Christopher Barkes' alleged conduct which resulted in his arrest on November 13, 2004. The response simply states that Karen Barkes got a call from Christopher when he was at HRYCI, but states no facts as to how and why he got there.

Administrative warrant #8787 dated November 13, 2004. arrested by Officer McLaughlin of the Wilmington Police Department and charged with loitering for purposes of purchasing drugs. He was also charged with driving with a revoked license.

Interrogatory # 7. This response does not include the requested date(s) of treatment at each facility/provide.

See attached. We do not have information on some of these providers.

Interrogatory #8. This interrogatory requests identification and information about *physicians* who were treating Barkes, including specifically physicians who prescribed certain medications to Barkes for diagnosed conditions. While pharmacies which would have filled prescriptions were listed, no information at all was provided responsive to the question about treating/prescribing physicians.

#### We do not have any of this information.

Interrogatory #9. This interrogatory requests, *intra alia*, "factual bases for your allegation in paragraphs 24, 26, and 27 that, as of November 13, 2004, upon his admission to HRYCI, Christopher Barkes was manifesting any suicidal ideations or threats, or otherwise indicating that he was, *at that time*, at risk for suicide.

Interrogatory #13. This interrogatory requests description and details of various medical and other conditions suffered by Barkes, including diagnoses and treatment. The reference to Response to Interrogatory #7, which is simply a listing of providers, is not responsive.

Emergency room admissions to Christiana Care on August 29, 2003, November 25, 2003, December 8, 2003, December 21, 2003, and December 25, 2003.

Interrogatory # 14: This requests information about medical diagnoses/treatment of the named plaintiffs. Two providers are listed, but it is not specified which plaintiff(s) treated there. An address is needed for therapist, Jane Anderson. As a reminder, I am still awaiting an executed medical release for Karen Barkes herself.

3608 Lancaster Pike Wilmington, DE (302) 995-9600

Interrogatory #15. Your response states that between 1995 and 1996, Christopher Barkes resided "no place in particular." Was he homeless? Can you be more specific with this response?

# PLAINTIFF'S RESPONSES TO REQUESTS FOR ADMISSIONS (D.I. 35)

RFA #7. Plaintiffs' responses denies that Christopher Barkes pled guilty to the referenced charges. Please refer to page D0059 in which the Court documents "Defendant's Guilty Plea."

RFA #9. Plaintiffs' response is not responsive. The question was whether Christopher and Karen Barkes were "separated and not residing in the same home" as of the date in question. As you know, there is no "official" or "legal" separation in Delaware. Does this response remain "denied" as to the question presented?

## PLAINTIFF'S RESPONSES TO REQUESTS FOR PRODUCTION (D.I. 34)

Request #11. This request was for documents "related to the investigation of Christopher Barkes' death..." The documents referenced in Plaintiffs' response, P0730-0738, appear to be copies of letters Christopher Barkes wrote to Karen Barkes from prison. These are clearly not responsive to the question. If no responsive documents exist, please state that. If responsive documents do exist, kindly reference and/or produce them.

Delaware State Police Troop 2 Complaint # 01-04-129879 Dated: Sunday, November 14, 2004 at 1150

Request # 12. This request is for correspondence to/from Barkes while he was incarcerated. Your response is "documents do not exist." It would seem that the documents referenced at # 11 are responsive to this request. Please advise.

Request #13: This has not been responded to yet. Please respond or state if no documents exist.

We have found no prior medical records or physician's names for care other than suicide attempts. No information of doctors who prescribed medicines.

Request # 15. This requests documents pertaining to Barkes' support of his children. Plaintiffs' response to "items of emotional support" may be viewed at the offices of Plaintiffs' attorney. Please describe what these "items" are so that I may determine how to proceed.

## Numerous family videos.

Request #16. You were awaiting copies of tax returns from the IRS. I am assuming these have been received by now. If so, please produce copies.

Requests # 17, 18, and 19. These requests have not yet been responded to. Please provide responsive documents if any exist.

Request # 20. Please describe the nature/contents of the "various tapes" (and whether audio, video, etc.) that are available to be "viewed" at your office. If copies of these tapes can be made for Defendants, with or without charge, please advise.

#### IN THE UNITED STATED DISTRICT COURT

#### FOR THE DISTRICT OF DELAWARE

KAREN BARKES, individually;

TINA GROSSMAN as next friend of

BRITTANY BARKES; TINA

GROSSMAN as next fried of ALEXANDRA BARKES; and

KAREN BARKES as administratrix of the

ESTATE OF CHRISTPHER BARKES,

Plaintiffs,

v.

FIRST CORRECTIONAL MEDICAL

INC.; STANLEY TAYLOR;

RAPHAEL WEILLIAMS: CERTAIN

UNKNOWN INDIVIDUAL

EMPLOYEES OF STATE OF

DELAWARE DEPARTMENT OF

CORRECTIONS; CERTAIN

UNKNOWN INDIVIDUAL EMPLOEES

OF FIRST CORRECTIONAL MEDICAL,

INC., and STATE OF DELAWARE,

DEPARTMENT OF CORRECTION,

Defendants.

C. A. No.: 06-104 JJF

# PLAINTIFFS' ANSWERS TO STATE DEFENDANTS' SECOND SET OF INTERROGATORIES DIRECTED TO PLAINTIFFS

INTERROGATORY NO. 22: In your response to State Defendants' Request for Admission (RFA) No. 13, you "deny" the statement: "At the time of his intake assessment at HRYCI on November 13, 2004, Christopher Barkes denied any suicidal thoughts or plans." Please state, with particularity and specificity, each and every factual basis for your denial and response to RFA No. 13, and identify all individuals with knowledge, documents or tangible physical evidence that support your contentions.

Specifically identify all information which you contend Christopher Barkes provided to HRYCI intake personnel which would have alerted them to his alleged imminent suicidal thoughts or plans.

RESPONSE: Adult Intake Mental Health Screening form dated November 13, 2004

- Time: 1500 hours. Item 1, 6, 8 and 10. Intake Officer Anita
Robinson - DOC

In your response to State Defendants' Request for Admission (RFA) No. 14, you "deny" the statement: "At the time of his intake assessment at HRYCI on November 13, 2004, Christopher Barkes denied any history of drug or alcohol abuse to intake personnel." Please state, with particularity and specificity, each and every factual basis for your denial and response to RFA No. 14, and identify all individuals with knowledge, documents or tangible physical evidence that support your contentions. Specifically identify all information which you contend Christopher Barkes provided to HRYCI intake personnel which would have advised them of his history of drug and alcohol abuse.

RESPONSE: Adult Intake Mental Health Screening form dated November 13, 2004

- Time: 1500. Item 16 - Officer Anita Robinson - DOC

INTERROGATORY NO. 24: In your response to State Defendants' Request for Admission (RFA) No. 15, you "deny" the statement: "At the time of his intake assessment at HRYCI on November 13, 2004, Christopher Barkes was not manifesting any violent or erratic behavior": Mr. Bakes exhibited at his initial intake, and identify all individuals with knowledge, documents or tangible physical evidence that support your contentions.

Case 1:06-cv-00104-JJF

Document 45

Filed 08/06/2007

Page 3 of 6

RESPONSE: Adult Intake Mental Health Screening form dated November 13, 2004

- Time: 1500 hours. Items 12, 13, and 15. Officer Anita Robinson -

DOC

In your response to State Defendants' Request for **INTERROGATORY NO. 25:** Admission (RFA) No. 16, you "deny" the statement: "At no time from his admission to HRYCI on November 13, 2004 until his suicide on November 14, 2004, did Christopher Barkes display any violent or erratic behavior." Please describe, with particularity and specificity, what sort of "violent or erratic behavior" (in addition to what you identify as responsive conduct - "refus[ing] to take a shower" and having a "flat affect") Mr. Barkes exhibited at HRYCI following initial intake until the time of his suicide, and identify all individual with knowledge, documents or tangible physical evidence that support your contentions.

RESPONSE: No current documents in our possession other than what is stated above. Plaintiff has an insufficient factual basis to admit or deny this statement.

MARTIN & WILSON, P.A.

K MARTIN, ESQUIRE

DE Bar I.D. No. 2407

1508 Pennsylvania Avenue

Wilmington, DE 19806

(302) 777-4581

E-mail: imartin@martinandwilson.com

Attorney for Plaintiffs

DATED: August 6, 2007 Case 1:06-cv-00104-JJF Document 51-2 Filed 10/15/2007 Page 126 of 144

Case 1:06-cv-00104-JJF Document 45 Filed 08/06/2007 Page 4 of 6

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Case 1:06-cv-00104-JUF

Document 45

Filed 08/06/2007

Page 5 of 6

STANDARD INTAKE SCREENING	FO	₹M				FCM OGRACOTORIES
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D00032

8.

Eiled 08/06/2007 Page 6 of 6 7.5E TOO WELL 17-JU Pagement 45 STANDARD INTAKE SCREENING FORM INMATE NAME: BARKE ID# Do you have or ever had any of the following diseases? Sexually transmitted diseases? If yes, what yes D no Treatment Asthma? COPD? yes no Heart disease? **y**⊕8 0 no yes Hepatitis? no Type yes ПО When Epilepsy? Date of last seizure yes no High Blood Pressure? Diabetes? yes [] no yes [] Туре no OTHER 11. Do you have any dentel problems? YES D Visual Exam Y N Oral Tissues Y N Infections Y N Caries Y Swelling/abnormalities Y N Describe abnormalities: NO Please complete all Info) 12. Access to Health Services explained to inmate YES D NO a 13. If the inmate is a female and between the ages of 10-50 years a urine pregnancy test must Negative 

Para Miscarriage SECTION 3: 1. HAVE YOU EVER BEEN TESTED FOR TUBERCULOSIS? IF NO THEN GIVE PPD AND DOCUMENT ON IMMUNIZATION/TB CONTROL RECORD NO D IF YES, CONTINUE WITH QUESTION #2 2. WAS YOUR LAST THE TEST POSITIVE OR NEGATIVE IF NEGATIVE WITH NO DOCUMENTATION, ADMINISTER PPD AND DOCUMENT IN CHART ON IMMUNIZATION RECORD. IF POSITIVE, MAKE CID REFERRAL. COMPLETE THE CHART BELOW. SYMPTOM NO COUGH WITH BLOOD DURATION COUGH W/O BLOOD FEVER **NIGHT SWEATS** LIVE W/TB CONTACT HX of DRUG ABUSE **WEIGHT LOSS** FATIGUE/MALAISE IF INMATE HAS COUGH, FEVER, OR NIGHT SWEATS, PLACE PT IN AN N-95 MASK UNTIL PLACED IN RESPIRATORY ISOLATION AND CALL PROVIDER IMMEDIATELY. PLAN OF TREATMENT STARTED COMPLETION DATE **CURRENT MEDICATIONS** TAKEN TB MEDS IN PAST PATIENT COUNSELED REGARDING ACTIVE VS. LATENT TB AND IMMUNZATION FORM COMPLETED.

000033

SIGNATURE & STAMP OF INTAKE NURSING STAFF

Case 1:06-cv-00104-JJF Document 51-2 Filed 10/15/2007 Page 129 of 144

Case 1:06-cv-00104-JJF Document 44 Filed 08/06/2007 Page 1 of 2

#### IN THE UNITED STATED DISTRICT COURT

#### FOR THE DISTRICT OF DELAWARE

C. A. No.: 06-104 JJF

KAREN BARKES, individually;

TINA GROSSMAN as next friend of

**BRITTANY BARKES; TINA** GROSSMAN as next fried of

ALEXANDRA BARKES; and

KAREN BARKES as administratrix of the

ESTATE OF CHRISTPHER BARKES,

Plaintiffs,

v.

FIRST CORRECTIONAL MEDICAL

INC.; STANLEY TAYLOR;

RAPHAEL WEILLIAMS: CERTAIN

UNKNOWN INDIVIDUAL

EMPLOYEES OF STATE OF

DELAWARE DEPARTMENT OF

CORRECTIONS; CERTAIN

UNKNOWN INDIVIDUAL EMPLOEES

OF FIRST CORRECTIONAL MEDICAL,

INC., and STATE OF DELAWARE,

DEPARTMENT OF CORRECTION,

Defendants.

#### NOTICE OF SERVICE

Please take notice that the undersigned did hereby forward copies of Plaintiffs'

Answers to State Defendants' Second Set of Interrogatories Directed to Plaintiffs via U.S.

First Class, Postage Paid Mail on this 6<sup>th</sup> day of August, 2007 to the following:

Stephani J. Ballard, Esquire Department of Justice **New Castle County** 820 North French Street Wilmington, DE 19801

Case 1:06-cv-00104-JJF Document 51-2 Filed 10/15/2007 Page 130 of 144

MARTIN & WILSON, P.A.

JEN REY N. MARTIN, ESQUIRE

DE Bar I.D. No.: 2407 1508 Pennsylvania Avenue Wilmington, DE 19806

(302) 777-4681

E-mail: jmartin@martinandwilson.com

Attorney for Plaintiffs

# IN THE UNITED STATES DISTRICT COURT

#### FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et al.	)
Plaintiffs,	)
v.	) C. A. No. 06-104-JJF
FIRST CORRECTIONAL	)
MEDICAL, INC.,	)
STANLEY TAYLOR, et al.,	)
	)
Defendants.	)

## STATE DEFENDANTS' SUPPLEMENTATION

#### OF INITIAL DISCLOSURES PURSUANT TO FED. R. CIV. P. 26(e)

Pursuant to Fed. R. Civ. P. 26(e), the Defendants Department of Correction, Stanley Taylor, Raphael Williams, and "Unknown Employees" of the State of Delaware ("State Defendants") make the following supplementary disclosures:

- (A) Individuals likely to have discoverable information in support of Defendants' defenses.
  - 15. Cpl. Brian Forte, Department of Correction;
  - 16. Sgt. Brian Emig, Department of Correction;
  - 17. Lt. Kimphus Daniels, Department of Correction;
- 18. Scott Ivy, New Castle County Police Department (formerly of Department of Correction)
  - 19. CO Denisha Young, Department of Correction;
  - 20. CO Reginald Young, Department of Correction;
  - 21. CO Gerwin Cumberbatch, Department of Correction;

- 22. Captain Carol Jefferson, Department of Correction
- 23. Phillip McLaughlin, Wilmington Police Department

In addition, State Defendants reserve their rights, pursuant to Rule 26(e) to identify additional witnesses. State Defendants further reserve the right to identify and call any witnesses listed by the Plaintiff or other Defendant(s).

## (B) Documents that may be used to support State Defendants' defenses:

To date State Defendants have produced documents Bates numbered D00001 – D00517 as well as medical records from the following providers: Catholic Charities, ShopRite Pharmacies and Jane Anderson, LCSW. Also, provided were employment records from Manor Care and records from the Delaware Board of Nursing.

#### STATE OF DELAWARE DEPARTMENT OF JUSTICE

/s/ Stephani J. Ballard
Stephani J. Ballard, I.D. #3481
Deputy Attorney General
820 North French Street, 6<sup>th</sup> Floor
Wilmington, Delaware 19801
(302)577-8400

Attorney for State Defendants

Dated: August 7, 2007

# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et al.	)
Plaintiffs,	)
v.	) C. A. No. 06-104-JJF
FIRST CORRECTIONAL	)
MEDICAL, INC.,	)
STANLEY TAYLOR, et al.,	)
	)
Defendants.	)

#### **NOTICE OF SERVICE**

The undersigned certifies that on August 7, 2007, she caused the STATE DEFENDANTS' SUPPLEMENTATION OF INITIAL DISCLOSURES PURSUANT TO FED. R. CIV. P. 26(e) to be delivered to the following persons in the form and manner indicated:

#### NAME AND ADDRESS OF RECIPIENT(S):

Jeffrey K. Martin, Esquire Martin & Wilson, P.A. 1508 Pennsylvania Avenue, Suite 1C Wilmington, DE 19806

Daniel McKenty, Esquire Heckler & Frabizzio P.O. Box 128 Wilmington, DE 19899-0128

#### MANNER OF DELIVERY:

X Two true copies by first class mail, postage prepaid, to each recipient

STATE OF DELAWARE DEPARTMENT OF JUSTICE

/s/ Stephani J. Ballard
Stephani J. Ballard, I.D. #3481
Deputy Attorney General
Carvel State Office Building
820 N. French Street, 6<sup>th</sup> Floor
Wilmington, DE 19801
(302) 577-8400
Attorney for State Defendants

# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et al.	)
Plaintiffs,	)
<b>v.</b>	) C. A. No. 06-104-JJF
FIRST CORRECTIONAL	)
MEDICAL, INC.,	)
STANLEY TAYLOR, et al.,	) .
75 C T	)
Defendants.	)

# STATE DEFENDANTS' SECOND SUPPLEMENTATION OF INITIAL DISCLOSURES PURSUANT TO FED. R. CIV. P. 26(e)

Pursuant to Fed. R. Civ. P. 26(e), the Defendants Department of Correction, Stanley Taylor, Raphael Williams, and "Unknown Employees" of the State of Delaware ("State Defendants") make the following supplementary disclosures:

## (B) Documents that may be used to support State Defendants' defenses:

- Health Care Services Contract dated 6/17/02 and September 2003
   Addendum Bates numbered D00518 D00525 (attached)
- Health Care Services Contract Request for Proposal March 2002 (available for review at office of counsel for State Defendants)
- Proposal to Delaware Department of Correction Health Care Services
   Contract #2828 from First Correctional Medical and Attachments to the
   Proposal (available for review at office of counsel for State Defendants)

# STATE OF DELAWARE DEPARTMENT OF JUSTICE

/s/ Stephani J. Ballard Stephani J. Ballard, I.D. #3481 Deputy Attorney General 820 North French Street, 6<sup>th</sup> Floor Wilmington, Delaware 19801 (302)577-8400

Attorney for State Defendants

Dated: August 30, 2007

RECEIVED

# HEALTH CARE SERVICES CONTRACT

2002 JUN 21 PM 2 04

BUSINESS Unit This Agreement is made this 17th day of June 2002, by and between First Correctional Medical-Delaware, L.L.C. ("FCM") and the State of Delaware, Department of Correction ("DOC").

#### RECITALS

WHEREAS, the DOC desires to purchase the health care services offered by FCM to serve the needs of the State of Delaware and the State's immate population; and WHEREAS, the State has asked prospective vendors to submit proposals for contract No. 2828; and

WHEREAS, FCM's sole member (First Correctional Medical, Inc.) submitted a proposal to provide the aforementioned health care services to the DOC and its proposal was accepted by the DOC; and

WHEREAS, on Wednesday May 29, 2002, the DOC and FCM's sole member entered into final negotiations with the express intent to execute a contract for the provision of health services to Delaware's incarcerated population; and

NOW THEREFORE, in consideration for the mutual promises contained herein, the parties enter into this Agreement and its related documents to govern their relationship and hereby revoke any previous agreement between the parties. All references in said documents to "FCM" or "First Correctional Medical, Inc." or "First Correctional Medical" shall be deemed a reference to FCM as if FCM made the proposal and agreements set forth in or under such documents and was the successful bidder. The Terms and Conditions of this Agreement are contained within this DOC/FCM health care services contract which shall include by this reference the Request for Proposal, FCM's Proposal and the FCM Question and Response Memorandum dated May 21, 2002; and NOW THEREFORE, the DOC and FCM mutually agree as follows:

000518

- This agreement is contingent upon funding being appropriated by the State of Delaware for each year of this contract. Funding is appropriated for medical services through the annual State Budget Act.
- 2. The DOC and FCM agree on an annual base price of \$17,735,904.00 for the 1<sup>st</sup> two years of the contract. FCM shall submit to DOC an invoice on or about the 15<sup>th</sup> and last day of each month during the term of this contract commencing on July 15<sup>th</sup> of each fiscal year. Each invoice shall be for one twenty-fourth of the annual base price due hereunder for each year of this contract. DOC shall pay each invoice within 5 days of receipt. The amount of said monthly payment shall change in the event of any mutually agreed to change in the annual base price for any year that this contract remains in effect or as otherwise provided under the contract documents including any schedules which are a part thereof or which are attached hereto (which shall be deemed a part hereof).

Additional modifications to the DOC Request and FCM's Proposal:

- A. The Sex Offender Unit has been deleted.
- B. Three Transition Units and a Structured Care Unit currently are in operation. The Transition Units are at Plummer Community Correctional Center, Multi-Purpose Criminal Justice Facility and Baylor Women's Correctional Institution. The Structured Care Unit is at Sussex Correctional Institution.
- C. Subject to the terms hereof and the documents referred to herein, the required Vendor services include but are not limited to basic medical services, mental health services, dental services, continuous suicide watch, the transition units, structured care programs, specialized women's services, and services to DOC staff. A complete itemization of services is in the DOC's RFP, as limited by FCM's Proposal.
- 3. The DOC accepts the variable rate per inmate proposed per year by FCM for times when the count is over the 6700-offender base as shown on the attached schedules which are made a part hereof. After each month, FCM and DOC shall

agree to a reconciliation of the number of inmates for the prior month (over a base of 6700). Any additional payment (based on the attached schedule) due FCM as a result of any number of inmates over the base amount shall be paid to FCM with the next payment due hereunder.

- 4. Annual increases will be in accordance with the revised Cost Summary Sheet presented in FCM's proposal reflecting the new base of \$17,735,904.00 and the other terms and provisions hereof.
- 5. FCM and the DOC agree to modify the RFP and Proposal as follows:

Case 1:06-cv-00104-JJF

- A. To the extent ACA Health Care Standards and NCCHC Standards differ, FCM will adhere to the higher standard;
- B. To the extent that community standards for mental health care are unclear or not specific, FCM will be required to implement "Best Practices" from State Correctional Systems, which shall be deemed to be the average national level of such services.
- C. Clarify language in the FCM proposal to read:
  - a) Pg. 26, paragraph 1, last sentence. Be it known that the DOC does not authorize the transfer of inmates to a detoxification facility.
  - b) Pg. 60, "Response to trauma incidents", second paragraph, last sentence should read: "These reports will be provided to the warden or designee, and others as appropriate in the corrections chain of command prior to the end of shift in which the incident occurred."
- D. Contract provides for a capitated rate for health care services. Fee structure is established by the base rate (as adjusted) plus per diem rate for immate population over 6700. Structural changes and/or additions to institutions will not result in a renegotiated rate for service.

E. The parties acknowledge that DOC shall pay for any equipment and services (including software and the charges for installation and training relating thereto) which are necessary, required or requested by FCM under the operation of this contract which individually exceeds \$500.00 per individual item. All equipment, supplies and facilities currently in place at or located within the facilities at which the services shall be provided shall be made available to FCM at no cost to or credit against FCM in connection with the performance of its services hereunder. In addition, DQC shall provide at its cost and expense all maintenance services required or requested by FCM in connection with any equipment or any part of the facilities.

Case 1:06-cv-00104-JJF

- F. Out of the first two payments due FCM hereunder, DOC shall retain a total sum of \$500,000.00 (\$250,000.00 in each of the first two payments) to insure the observance and performance of all of the covenants, terms, conditions and undertakings herein contained to be performed or observed by FCM. Said security deposit or the balance thereof shall be returned to FCM not more than thirty (30) days following the termination or expiration of this contract provided that FCM has materially performed and observed all of said covenants, terms, conditions and undertakings herein. No other bond, guaranty or other deposit, security or assurance shall be due, required or owed by FCM.
- G. Any financial reporting obligations shall be limited to FCM.
- H. In no event shall staffing levels constitute a breach or default by FCM hereunder.
- I. In the event that FCM does not receive payment on or before the 30 day following the receipt of an invoice by the DOC, the amount due on the invoice shall bear interest at an annual rate of 12.00% (or the maximum rate allowed by law, whichever is lower) until said payment is made in full.

6. The DOC is purchasing Professional Health Services. Performance is the essence of this contract. To the extent, negotiations involved a discussion of staffing patterns; those discussions were intended to ensure FCM fully understood the scope of the contract.

#### 7. Appropriation

Funds authorized for use under the contract are obligated within the budget period (fiscal years July 1- June 30) of which they are awarded. Contracts and purchase orders must be issued on or before the expiration date of the budget period or the funds will no longer be available for use by the vendor. If funds are not appropriated at the amounts established by this contract each party shall have the right, to be exercised with not less than 60 days prior notice to the other, to terminate this contract and all payment and service obligations hereunder and relating hereto. However, said termination right may only be exercised with an effective date of the last day of the last month of a fiscal year of the term of this contract. At no time will the level of services go below those specified by the NCCHC Prison Standards.

## DEPARTMENT INDEMNIFICATION

The FCM will hold harmless, indemnify, and defend the DOC, the State of Delaware and their agents, employees, or officers of the State of Delaware from any and all suits, actions, losses, liability, damages (including punitive damages), expenses, reasonable attorney fees (including salaries of attorneys regularly employed by the State of Delaware), judgments, or settlements incurred by the DOC, the State of Delaware or their agents, employees, or officers arising out of the negligent provision of health care services by FCM, its employees, or subcontractors under the contract, including direct or indirect negligence or intentional acts of omission or commission, and professional malpractice regardless of any negligence or any intentional acts of omissions or commission by employees or officials of the DOC.

## 9. APPLICABLE LAW/GOVERNING LAW/ CHOICE OF LAW

The laws of the State of Delaware shall apply, except where Federal Law has precedence. FCM consents to jurisdiction and venue in the State of Delaware. The DOC shall enter a Purchase Order on or before June 30, 2002. The Purchase Order must be approved on July 8 2002 or this contract shall be null and void and of no force or effect. FCM must possess an active Delaware Business License as issued by the Department of Finance through its Division of Revenue. FCM must remain in good financial standing with the State of Delaware.

If any provision of this contract is held by a court of competent jurisdiction to be contrary to law, the remaining provisions of this contract will remain in full force and effect.

FCM's sole member shall have no right, title, obligation or liability hereunder or under any document referred to herein unless hereafter expressly accepted and agreed to thereby.

## 10. TERMS AND RENEWAL OPTIONS

Subject to the other terms and provisions hereof, the initial term ("Initial Term") of this contract shall be for a period of 6 years commencing July 1, 2002 (" the Commencement Date") and expiring (unless renewed) on June 30, 2008. This contract is renewable by the DOC for two (2) additional periods of two (2) years each ("the Extended Term"), according to the terms of the RFP.

If DOC defaults hereunder, FCM may, at its discretion, terminate this contract upon not less than thirty days written prior notice.

## 11. CONFLICT RESOLUTION

The contract documents shall consist of this contract, the Request for Proposal, the FCM Proposal, and the FCM Question and Response Memorandum dated May 21, 2002, as well as all cost and other updates relating thereto and the schedules, grids and other attachments attached hereto which are hereby made a part hereof. In the event of any conflict between the contract documents, the contract documents

will be interpreted in the following order and the lower number below shall govern and control:

- 1. This Contract and the summary sheet, pricing grid, and the other schedules, grids and attachments hereto.
- 2. FCM's response to DOC written questions dated 5/21/2002 (the FCM Question and Response Memorandum dated May 21, 2002)
- 3. Request for Proposals (including any amendments and updates and other questions and answers)
- 4. FCM Proposal and any updates relating thereto

STATE OF DEA	(A)	WAR	E.	1	
DEPARTMENT	or.	COL	kκί	Юı	ION

BY:

TITLE: Commissioner

DATE: 6/17/02

FIRST CORRECTIONAL MEDICAL

DELAWARE, L.L.C.

TITLE: President

DATE: 6/17/62

# ADDENDUM TO HEALTH CARE SERVICES CONTRACT #2828

# TO ESTABLISH A PROCEDURE FOR REIMBURSEMENT OF PAYMENT TO THE DEPARTMENT OF HEALTH AND SOCIAL SERVICES (DHSS) FOR MEDICAID ELIGIBLE INCARCERATED PERSONS

In accordance with the agreement between DHSS and FCM, incarcerated persons under the custody of the Delaware Department of Corrections (DOC) who incur inpatient hospital stays greater than 24 hours, in an acute care hospital with a Delaware Medicaid provider agreement, shall be considered for Medicaid.

It is agreed that the DOC will reimburse DHSS for 100% of the Medicaid per discharge and outlier payments and ancillary payments made for incarcerated persons. FCM understands that DOC will then recover 100% of the Medicaid discharge and outlier and ancillary payments by reducing payments DOC makes to FCM. All payments will be made in accordance with the payment schedule defined in the contract agreement #2828.

State		4	
V tota	$\wedge$ + $\square$	A 1033	70 T.O
OING	4 J I 1 1	CIAN	au

Department of Confection

Title: Commissioner

Date: <u>5/5/03</u>

First Correctional Medical

Page 143 of 144

Delaware, L.L.C.

Title: President

Date: 418/83

# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

KAREN BARKES, et al.	)	
Dlaim#iffa	)	
Plaintiffs,	)	
<b>v.</b>	<u> </u>	C. A. No. 06-104-JJF
FIRST CORRECTIONAL	)	
MEDICAL, INC.,	)	
STANLEY TAYLOR, et al.,	)	
	)	
Defendants.	)	

#### **NOTICE OF SERVICE**

The undersigned certifies that on August 30, 2007, she caused the STATE DEFENDANTS' SECOND SUPPLEMENTATION OF INITIAL DISCLOSURES PURSUANT TO FED. R. CIV. P. 26(e) to be delivered to the following persons in the form and manner indicated:

### NAME AND ADDRESS OF RECIPIENT(S):

Jeffrey K. Martin, Esquire Martin & Wilson, P.A. 1508 Pennsylvania Avenue, Suite 1C Wilmington, DE 19806 Daniel McKenty, Esquire Heckler & Frabizzio P.O. Box 128 Wilmington, DE 19899-0128

#### MANNER OF DELIVERY:

X Two true copies by first class mail, postage prepaid, to each recipient

STATE OF DELAWARE DEPARTMENT OF JUSTICE

/s/ Stephani J. Ballard
Stephani J. Ballard, I.D. #3481
Deputy Attorney General
Carvel State Office Building
820 N. French Street, 6<sup>th</sup> Floor
Wilmington, DE 19801
(302) 577-8400
Attorney for State Defendants

STANDARD INTAKE SCREENING	FOR	M				DESCRIPTIONAL WAY
LAST NAME_BANKES			•			
FIRST NAME Chershope	•					\ ECM /
Institution name:	•				•	FCM
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D.O.B. 12-12-66 NUMBER 36/999		/C DAT	- 11/1-1			
		KE DAT		TIME	150	00
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· · · · · · · · · · · · · · · · · · ·			-			
ANY OBVIOUS SIGNS OF ALTERED MENTAL STATUS, YES/NO (If yes describe)	ALTER	ED APF	EARANCE,	OR ABN	IORMAL	CONDUCT?
			<del></del>			
ANY SIGNS OF TREMORS OR SWEATING? YES /NO /	f ves n	ease d	escriba)		<del></del>	
	<u>, , , , ,</u>	roade d	030(100)			
SECTION 2:						<del></del>
1. Are you currently on any medications?	····					
if inmate on medications, call the MD to get orders to ear	tinue/d	no hange/	or ston			
Medications brought with patient?  MEDICATIONS & DOSES 1.	٥	no				
15th no a se	2m =	_2	EFFE	Kale	m	15000
3 Stagged 25 mg Synth	ante	Z.6			-	m/
2. Are you allergic to any medications?	an	90	ary			
IF YES PLEASE LIST THE ALLERGIES AND REACTIONS		ye	15 TU	no	>=-	•
<ol><li>Has a Doctor told you to take pills for any illness?</li></ol>	yes	0	no	<b>S</b>		
	,	_	110	لنعم		
4. Have you been exposed to HIV? (blood transfusion etc)	yes		no	حطر		
5. History of intravenous drug abuse?	yes		по	, E		
6. Visible poor skin conditions, rashes, or needle marks?	•					
IF YES PLEASE DESCRIBE	yes	a	no	صحج		
7. History of alcohol abuse?						
History of according abuse?	yes	0	no	<b>_</b>		-
History of marijuana abuse?	yes yes	0	no			•
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DESCRIBE ANY VISIBLE SIGNS OF ALCOHOL OR DRUG	ነለብም፣ ነጥ	VD 4144	•			
TOTAL OF ALCOHOL OR DRUG	vvi i HL	YKAWL				
8. Have you ever attempted suicide?			····	-		•
and the state among among the	yes		no .	0		
9. Are you afraid you might lose your mind		•				
or go crazy?	1/00	_		_		

D00032

PATIENT COUNSELED REGARDING ACTIVE VS. LATENT TB AND IMMUNZATION FORM COMPLETED.

D00033

# ADULT INTAKE MENTAL HEALTH SCREENING



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Inger						
1. Hallucinations	io				<u> </u>	<u>.</u>
		If yes describe	•			
2. Violent Behavior or Threats			<del></del>		<del></del>	
		.———				
Suicide Prevention Scre	ening (check	appropriate col	A			
		Column A	Column B	luestion)	COLORONOS	
Arresting or transporting officer believes subject may be		YES	NO		COMMENTS	
suicide risk. If yes, notify Provider on call.	•	_				
Lacks close family/friends in community.						
- Community.	-					
3 Hymphiana day 1 10						
3. Experienced a significant loss within the last 6 months (loss of job,					<del></del>	
relationship, death of close family member).	ı			j		
4. Worried about major problems other than legal situation				<del> </del> -		
i.e. terminal illness).			V	1		
Family member or significant other has attempted or committed				<del> </del>		·
arcine (spouse, patient, sibling, close friend, lover)	J		V	1		
. Has psychiatric history (note current psychotronic medical and			· · · · · · · · · · · · · · · · · · ·	<del> </del>		
ame of most recent treatment agency).	ļ			1		
Holds position of respect in community (i.e. professional, public						
ul) and/or alleged crime is shocking in nature. Feels	. 1	j				
incorrassment/shame. If yes, notify Provider on call.	1	j	سسند	İ		
Is thinking about killing self. If yes, notify Provider on call.						
If yes to #8, has a suicide plan and/or suicide instrument in						
essession?	]					
. Has previous suicide been attempted? (Check wrists and	<del></del> -					
ite method).	ĺ			OVER	Pase 200	22
. Feels there is nothing to look forward to in the future				•		•
Oresses feelings of helplesses and it in the future	, ]					<del></del>
expresses feelings of helplessness and hopelessness). If yes #10 and #11, notify Provider on call.	1	i	Ī			
Shows signs of Assessing						
Shows signs of depression (crying, emotional flatness).			-	***		
Appears overly anxious, afraid, or angry.		·		<del></del>	<del></del>	
Appears to feel unusually embarrassed or ashamed.				<del></del>	<del></del>	
Is acting and/or talking in a strange manner. (Cannot focus					·	
ntion, hearing, or seeing things that are not there.)		1				
Is apparently under the influence of alcohol or drugs			-			
If yes to #16, is individual incoherent or showing signs of		<del></del>	<u> </u>			
idrawal or mental illness? If yes to both #16 and #17, notify Provider		}	. !			
call.	1	1	ł			
		1	<u>_</u>			_
ions: If total checks in Column A see 8 common and Column	iran A:	L				
Total Column A arc 8 or more, notify Provider on call.  Call Provider notified: Yes	SIGNATURE C	F SCREENING	MEDICAL S	TAFF:		
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1 to: Mental Health Team	<u> </u>		<u> </u>			
Yes No		_ <del></del>				
Emergency: Who When		,	•			
Non-emergency		1				
	7	-()		<b>,</b> .	D0003	(0
NATURE AND STAMP OF INTAKE MEDICAL STAFF		$\mathbb{Z}X$		<i>!</i>		ブ
MR-1001 Revised 3/11/2004 First Com				<del></del>	-	
First Cor	rectio Abb (	tra, Inc.		N.	ot for Redistribution	_
	~000	1 11		IN	or for registribution	Oπ





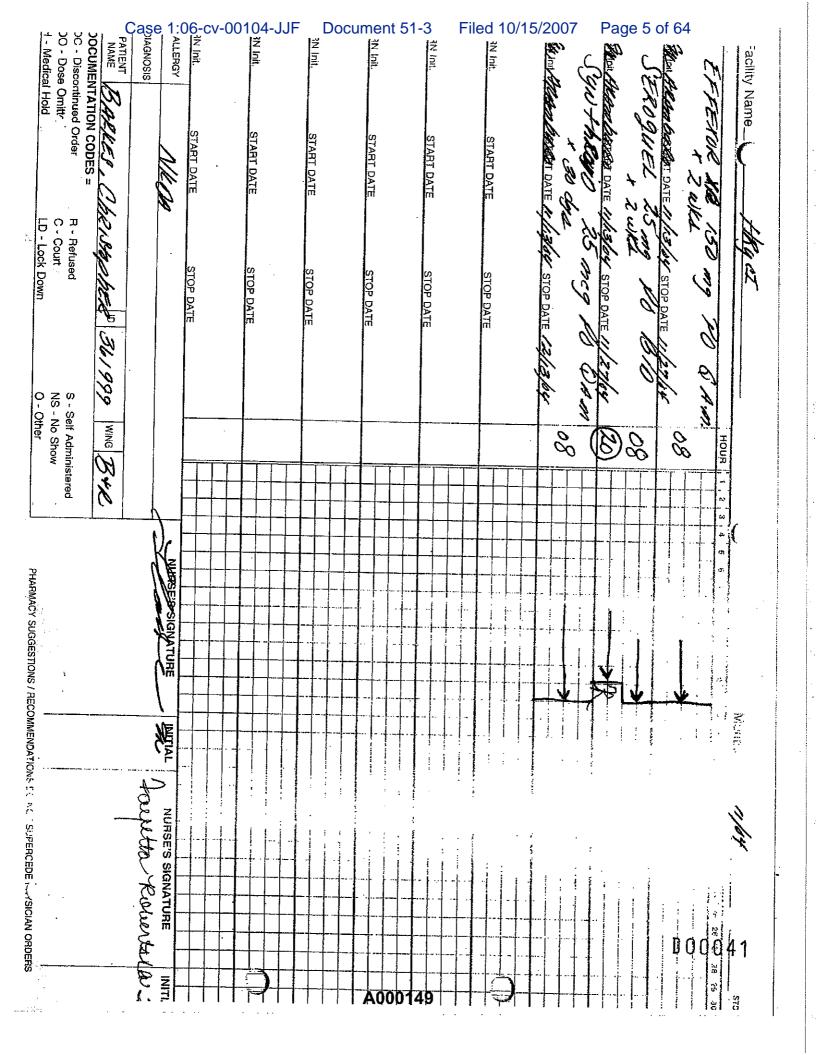
Date of Referral:   36/999   11 · 13 · 04     Job:   Lock:   Unit:     URGENCY LEVEL:   Routine   ASAP   Urgent     Additional Comments:   H   Bipolate   H   ATTEMPTED     Suicide   W   2003     BRIDGE ORDER: medication, dose, expiration date:
URGENCY LEVEL: Routine   ASAP   Urgent  Additional Comments: Hx Bipolitic   Hx ATTEMPTED  Suicide   2003
Additional Comments: HY Bipolan, HX ATTEMPTED  Suicide in 2003
Additional Comments: HY Bipolan, HX ATTEMPTED  Suicide in 2003
Additional Comments: HY Bipolan, HX ATTEMPTED  Suicide in 2003
Suicide in 2003
Suicide in 2003
BRIDGE ORDER: medication, dose, expiration date:
O NO BRIDGE ORDER but inmate CURRENTLY ON PSYCHIATRIC MEDICINE:
medication, dosage, last time medicine was taken:
area taken:
INMATE REFUSES MEDICATION OR MEDICATION HAS EXPIRED
The second desired of the desired of the desired of the second of the desired of the second of the s
Referred by:
Title:
Phone Ext.
Response:
[ents  Health Staff Signature:
fental Health Staff Signature: Date of Response:
fental Health Staff Signature:  Date of Response:  upervisor Signature;

Admin-2024 Revised 3/16/04

First Correctional Medical

Not for Redistribution

D00040



Date: 11/15/2004

micide II(# 3009890

Case 1:06-cv-00104-JJF Document 51-3 Filed 10/15/20
HRYCI Howard R.Young Correctional Institution

1301 E. 12th Street

**WILMINGTON DE, 19809** Phone#: 302-429-7700

# **INCIDENT REPORT**

Jup#: <u>N/A</u>	Type: Inmate Involved	5 X X X X X X	Date: <u>11/14/2</u>	<u>004</u> Time: <u>11:35</u> C	onfidential: <u>No</u>
Facility: HRYC	I Howard R.Young Correctional Instituti	ОП	<u> Veren e l'entrelle de l'Elle l'entrelle</u>	Followers	Required :No
Incident Locat	ion: <u>RECEIVING ROOM</u>	<del></del>		ronowup	wednited : MO
Location Desc	ription: receiving room #122				
Violated Condi					
Description of					
after doing a fug 122 window ! Ca Barkes was in the in the headcount the area and re	d time while relieveing 12x8 shift I C/O window in room 122, and asking I/M pitive warrant I C/O Fields went up front I/O Fields look inside and seen I/M Barine same position. Approximately 1135 vit for booking and receiving when OFFIC esponded in the back with Officer Marin, and Gabriel Termilus responded in rollingured Persons	to hand paper was new to hand paper was laying in the ville OFFICER ER Martelli call telli, and Cpl. wom 122 and to	vork to primary e bed awoke. I Martelli was s led a Code 7. I Rayne. Approxon	ponded with " yes". Approxing, the captain quarters while was white white the captain quarters while was when I returned at approximating to run chow, I C/O Figure 1 and the code with the code with the code was with the code was with the code was with the code was with the code was with the code was was with the code was was with the code was was with the code was was was with the code was was was was was was was was was was	nately 1045 hrs valking by room nately 1100 I/M elds was calling
	injured Persons	Hospitalize	d <sup>*</sup>	Nature Of Injuries	· · · · · · · · · · · · · · · · · · ·
		N/A	N/A		<del> </del>
Evidence Type:				Date Collected: N	Ι/Δ
Discovered By	: <u>N/A</u>		Secured		<u> </u>
ype of Force L Restraints Used rediate Action I/A	d : N/A	CAL[] ST	TO [] OT	HER [] CAPSTUN [X]	NONE
	1	idividuals inv	Ovzede s		
Person Code	Name		SBI#	Title	4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
ımate	Christopher, Barkes	<del></del>	00361999	N/A	
taff	Stephen, Martelli		N/A	Booking/Receiving Room (	Officer
taff	Dorene, Fields		N/A	Booking/Receiving Room (	
taff	Sandra, Rayne		N/A	Booking/Receiving Room (	
eporting Office	Pr: Fields, Dorene (Booking/Receiving I Officer)	Room E	ntered By: Fie	elds, Dorene (Booking/Recei	
X Approved omments: N/A		proval inform Approved by:	retion		

3009891

-3 Filed 10/15/2007

Page 7 of 64

Date: 11/15/2004

TIKT OF HOWARD R. YOUNG Correctional Institution

1301 E. 12th Street WILMINGTON DE, 19809

Phone#: 302-429-7700

INCIDENT REPORT

oup#:N/A Type: Inmate Involved Incident Date: 11/14/2004 Time: 11:35 Confidential: No Facility: HRYCI Howard R.Young Correctional Institution Followup Required : No Incident Location: RECEIVING ROOM Location Description: RECEIVING ROOM ROOM 122 Violated Conditions: Other Description of incident: Approx 1135 lc/o martelli wasfeeding lunch when lc/o martelli entered 122 to feed det barkes christopher 361999. Athat time IC/O MARTELLI ENTER 122 TO CHECK ON DETBARKES .AT THAT TIME DET BARKES WAS HANGING FROM THE STEEL PARKA IN ROOM 122.AT THAT TIME I C/ MARTELLI INFORMED C/O FIELDS TO CALL CODE? . AT APPROX 1137 CODE? WASCALLED I C/O MARTELLI UNTIED DET BARKES AND LOWERED TOFLOOR. Injured Persons Hospitalized Nature Of Injuries N/A N/A N/A Evidence Type: N/A Date Collected: N/A Discovered By :N/A Secured By: N/A Type of Force Used: [] PHYSICAL CHEMICAL [] STUN [] OTHER [] CAPSTUN [X] NONE Restraints Used : N/A Immediate Action Taken: N/A I gan over the Individuals Involved 'arson Code Name SBI# Title Immate Christopher, Barkes 00361999 N/A Staff Dorene, Fields N/A Booking/Receiving Room Officer Staff Stephen, Martelli N/A Booking/Receiving Room Officer Staff Sandra, Rayne N/A Booking/Receiving Room Officer Reporting Officer: Martelli, Stephen (Booking/Receiving Room Entered By: Martelli, Stephen (Booking/Receiving Room Officer) Officer) Approval Information Approved Disapproved Date: 11/14/2004 Approved by: Polk, John W (Staff Lt./Lt) Comments: N/A

# Case 1:06-cv-00104-JJF

Document 51-3

Filed 10/15/2007

Page 8 of 64

**HRYCI Howard R.Young Correctional Institution** Date: 11/15/2004

1301 E. 12th Street **WILMINGTON DE, 19809** Phone#: 302-429-7700

## INCIDENT REPORT

WP#:N/A

HICHIOTECE

3009895

Type: Inmate Involved

Incident Date: 11/14/2004

Time: <u>11/35</u>

Confidential: No

Followup Required: No

Facility: HRYCI Howard R. Young Correctional Institution

incident Location: RECEIVING ROOM

Location Description: RECEIVING ROOM CELL#122

Violated Conditions: Other Description of Incident:

ON THE ABOVE DATE AND APPROXIMATE TIME, OFFICER MARTELLI WAS FEEDING LUNCH TO THE INMATES IN BOOKING AND RECEIVING. WHEN OFFICER MARTELL! WENT INTO CELL#122 TO FEED INMATE BARKES, CHRISTOPHER , HE YELLED FOR CPL RAYNE. CPL RAYNE WAS IN ROUTE TO PRIMARY CONTROL. CPL RAYNE RAN INTO CELL#122 AND FOUND INMATE BARKES HANGING BY HIS NECK WITH A SHEET. INMATE BARKES HAD MUCUS COMING OUT OF HIS NOSE AND MOUTH. OFFICER MARTELLI YELLED FOR OFFICER FIELDS TO CALL A CODE 7. CPL RAYNE AND OFFICER MARTELLI WAS TRYING TO UNTIE THE SHEET. CPL RAYNE TOLD OFFICER MARTELLI TO GO GET THE CUTTER. OFFICER MARTELLI RAN TO THE KEY BOX WHERE THE CUTTER IS KEPT. CPL RAYNE RAN AFTER HIM BECAUSE SHE HAD THE KEY THAT OPENS THE KEY BOX ON HER PERSON. CPL RAYNE TOOK OUT THE SCISSORS AND THE CUTTER. OFFICER MARTELLI AND CPL RAYNE RAN BACK TO CELL#122, OFFICER MARTELLI WAS TRYING TO CUT INMATE BARKES DOWN WITH THE CUTTER. CPL RAYNE WAS TRYING TO HOLD INMATE BARKES BODY. CPL RAYNE BEGAN TRYING TO CUT HIM DOWN WITH THE SCISSORS. CPL RAYNE TOLD OFFICER MARTELLI TO TRY TO UNTIE THE SHEET. OFFICER MARTELLI WAS ABLE TO UNTIE THE SHEET, SGT WAY THE FIRST FLOOR LEAD WORKER ARRIVED WITH MEDICAL STAFF. CPL RAYNE GAVE SGT WAY THE CUTTERS TO CUT THE SHEET OFF OF INMATE BARKES NECK. CPL RAYNE LEFT THE CELL WHILE MEDICAL STAFF WORKED ON INMATE BARKES. BARKES,CHRISTOPHER INMATE#361999 D.O.B. 12/12/1966 WAS HOUSED IN BOOKING AND RECEVING BECAUSE HE VIOLATED HIS PROBATION, HE CAME IN ON SATURDAY AT 1445 WITH PLUMMER CENTER. INMATE BARKES WAS DUE TO BE TRANSFERED TO THE V.O.P.BUILDING ON MONDAY MORNING. INMATE BARKES WAS PLACED IN CELL#122 CH IS LOCATED ON THE RIGHT HAND SIDE WHEN YOU ENTER BOOKING AND RECEIVING. THERE IS A BIG WINDOW IN THE CELL WHERE INMATE BARKES WAS LOCATED. CPL RAYNE LAST CHECKED ON INMATE BARKES AT APPROXIMATELY 1050. INMATE BARKES WAS ASKED BY CPL RAYNE IF HE WANTED TO TAKE A SHOWER. INMATE BARKES STATED THAT HE WAS OK AND SAID NO. CPL RAYNE ASKED HIM WAS HE SURE, INMATE BARKES SHOOK HIS HEAD AND SAID NO AGAIN. INMATE BARKES LAID BACK ON THE BOTTOM BUNK

Injured Persons					Hospitalized Nature Of Injuries					
Evidence Type: <u>N/A</u> Discovered By : <u>N/A</u>						<u> </u>	ıred By: <u>N/</u>		Pate Collected: N	<u>/A</u>
PHYSICAL	[]	CHEMIC	AL	[]	STUN	[]	OTHER	[]	Capstun [X]	NONE
					<del></del>			·		
	PHYSICAL	PHYSICAL []	PHYSICAL [] CHEMIC	PHYSICAL [] CHEMICAL	PHYSICAL [] CHEMICAL []	Persons Hospitalized N/A  PHYSICAL [] CHEMICAL [] STUN	Persons Hospitalized N/A N/A Secu	Persons Hospitalized  N/A  N/A  Secured By: N/  PHYSICAL [] CHEMICAL [] STUN [] OTHER	Persons         Hospitalized         Na           N/A         N/A           Secured By: N/A           PHYSICAL [] CHEMICAL [] STUN [] OTHER []	Persons  Hospitalized  N/A  N/A  Date Collected: N  Secured By: N/A  PHYSICAL [] CHEMICAL [] STUN [] OTHER [] CAPSTUN [X]

Person Code	Name	SBI#	T(tle
nmate	Christopher, Barkes	00361999	N/A
Staff	Sandra, Rayne	N/A	Booking/Receiving Room Officer
Staff	Stephen, Martelli	N/A	Booking/Receiving Room Officer
Staff	Dorene, Fields	N/A	Booking/Receiving Room Officer
Staff	Fred, Way III	N/A	CO Corporal/Sgt Large Inst.

rting Officer: Rayne, Sandra (Booking/Receiving Room Officer)

Entered By: Ravne, Sandra (Booking/Receiving Room Officer)

Incident# 3009895

Case 1:06-cv-00104-JJF Document 51-3 Filed 10/15/2007 Page 9 of 64 HRYCI Howard R. Young Correctional Institution Date:

1301 E. 12th Street

WILMINGTON DE, 19809

Phone#: 302-429-7700

**INCIDENT REPORT** 

<b>Q</b>	up#: <u>N/A</u> .	Type: Inmate	involved	incident Date: M/I	4/2004 Time; <u>11:85</u>	Confidential: No
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Com	Approved [	Disapproved	Date:	Approved by:		-
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ti.: Šyru						
		•				

Date: 11/15/2004

## Downey Ann (DOC)

From:

Phelps Perry (DOC)

Sent:

Monday, November 15, 2004 11:04 AM

To:

Howard Paul (DOC)

Cc:

Williams Raphael (DOC); Downey Ann (DOC); Mann Sue (DOC)

Subject: I/M Christopher Barkes #00361999

Chief,

The official time of death is 1242 hours 11/14/2004. I/M Barkes was seen upon his arrival on 11/13/04 @

During the standard intake screening, he was asked had he ever attempted suicide and he said yes, which was the (2003) incident not (2001) which I had previously relayed to you. He also stated that he was taking several mental health medications, which an order was written and he received on Saturday night. He did not receive any on Surday, simply because the medical cart had not arrived in his area yet.

The sue with the Intake mental health screening goes like this, there are 17 questions on the suicide prevention screening form, at the bottom of the form reads like this: Actions, if total checks in Column A are 8 or

more, actify Provider on call.

The score only totaled up to 2, the two yes answers were patient has psychiatric history and has previous suicide attempt. (overdose 2003). Therefore, the threshold of eight or more yes answers were not met. I have included a copy of the Mental Health Screening form for your review.

Should you have any questions or comments please feel free to contact me at 429-7746.

## **Mortality Review**

Date	Time	Chronlogical Review of Relevant Events ****
11/14/04	<del></del>	Code of called to booking & Leeiving. Inmate was
	·	tound by medical staff with a sheet tied around
		his neck, lying next to the toilet. to pulse or
ļ	<del></del>	Lespirations' Were found. Inmake placed on
ļ		back on floor and are was started.
		411 was Called.
		AED paddles were applied. AED advised "no
	-	Shock advised 4 times,
		CPR continued until EmT's arrived and
		took over.
	····-	Inmade was tracked by the 5m7's and
		transported via ambulance to Christiana
		Abspital.
<u> </u>		
·		
Allengarian de la company de la company de la company de la company de la company de la company de la company de la company de la company de la company de l	,	
-		
Relevant eve	ents incl	ude: Nurse Sick Call Physician Visit Chronic Care Visit Suicide Attempt
Emergency vi		The state of the s
Later Genicy VI	iait iO,	Medical Unit Emergency Department Crisis Intervention Center Hospital Surgery
MATE ĻAST	NAME	
Barkes		Christopher 00361999 100013
VWI ILL	<u></u>	



## DELAWARE HEALTH AND SOCIAL SERVICES

OFFICE OF CHIEF MEDICAL EXAMINER FORENSIC SCIENCES LABORATORY

Richard T. Callery, M.D., F.C.A.P. Chief Medical Examiner Director, Forensic Sciences Laboratory

# **Toxicology Report**

Date

Name

CHRISTOPHER BARKES

Case No. N 04-1892

Tox No. 04-0668

Rec'd in Lab by

Jessica Jennings

11/15/2004

Compound

Time

12:57

Medical Examiner

Jennie Vershvovsky, MD

Heart Blood

**OCME Screens** 

Procedure

By EIA

Specimen

Result

None Detected

## **OCME Confirmations**

Postmortem Drug Screen 1

Procedure

Alcohol Analysis By GCFID Specimen

Compound

Result

Heart Blood

None Detected

Certifying Toxicologist

12/3/04 Date

000026



<sup>\*</sup> Enzyme Immunassay (EIA) provides only a preliminary analytical result that is contingent upon a confirmatory test.

STANDARD OPERATING PROCEDURE	POLICY NUMBER	PAGE NUMBER		
DEPARTMENT OF CORRECTION BUREAU OF PRISONS CORRECTIONAL INSTITUTION	190.04	1 OF 4		
HOWARD R YOUNG CORRECTIONAL INSTITUTION EFFECTIVE DATE: JANUARY 1, 2001	OPR: HEALTH CARE			
APPROVED BY WARDEN:	SUBJECT: SUICIDE PREVENTION			
REFERENCES:				

- I. POLICY: It is the policy of HRYCI personnel to provide special training by qualified instructors in order to identify and monitor those offenders who may be a suicide risk during intake processing and/or the identification and supervision of suicide-prone offenders during their incarceration. The suicide prevention and intervention program shall be reviewed and approved by a qualified medical or mental health professional.
- II. SCOPE: This procedure shall apply to all Howard R Young Correctional Institution personnel.

#### III. PROCEDURE:

- A. Recognizing suicide potential during the admissions/classification process
  - 1. Medical screening is conducted by a member of the medical staff who will consider the suicide potential of an offender in regard to the following factors:
    - Severe alcohol/drug dependence
    - b. Psychiatric potential suffering from impaired judgment or history of mental illness.
    - c. Chronic physical problems
  - 2. Classification interview Classification Specialists shall consider offenders a suicide risk if they possess the above risk factors and state that they:
    - a. Have a history of recent or recurrent suicide attempts.
    - b. Have seriously contemplated suicide in the past or present.
    - c. Have extreme depression or impulsiveness, including feelings of hopelessness that appear to be chronic.
    - d. Have been admitted to a mental hospital or crisis center for attempted suicide.
- B. Post admission indicators of suicide potential
  - 1. Some offenders, during their incarceration, may begin to experience suicidal thoughts or conversations, and those who are contemplating suicide, will display signs of depression.
  - 2. During a suicidal crisis, most persons will display either some or all of the following signs of depression:

STANDARD OPERATING PROCEDURE	POLICY NUMBER	PAGE NUMBER
DEPARTMENT OF CORRECTION BUREAU OF PRISONS HOWARD R YOUNG CORRECTIONAL INSTITUTION	190.04	2 OF 4
SUBJECT: OFFENDER MOVEMENT		

- a. Sadness or crying
- b. Withdrawal or silence
- c. Loss or gain of appetite marked by noticeable weight gain or loss
- d. Insomnia
- e. Mood variation (in many cases, extreme and unexplained)
- f. Lethargy (slowing of physical movements such as walking and talking)
- g. Changes in behavior such as giving away personal possessions, planning a funeral, putting affairs in order, etc.
- 3. Additionally, many offenders may give a housing unit officer verbal cues that indicate a suicide crisis is impending, such as:
  - a. Projecting feelings of hopelessness and helplessness
  - b. Speaking about getting out of jail unrealistically
  - c. Not effectively dealing with the present and being preoccupied with the past
  - d. Explaining intentions to commit suicide
  - e. Increasing difficulty relating to others
  - f. Exhibiting sudden changes in behavior (i.e., makes an unprovoked attack on a Correctional Officer)
- 4. Offenders who should be observed closely for possible suicidal tendencies are:
  - a. Older offenders
  - b. Chronically or terminally ill offenders
  - c. Offenders recuperating from major surgery
  - d. Anyone subjected to homosexual assault
  - e. Incarcerated law enforcement officers
  - f. Incarcerated professionals

STANDARD OPERATING PROCEDURE	POLICY NUMBER	PAGE NUMBER
DEPARTMENT OF CORRECTION BUREAU OF PRISONS	190.04	3 OF 4
HOWARD R YOUNG CORRECTIONAL INSTITUTION SUBJECT: OFFENDER MOVEMENT		

- g. Persons who have committed a crime of passion
- 5. If a Correctional Officer has reason to believe that an offender fits any of the aforementioned profiles:
  - a. Immediately implement crisis intervention techniques
  - b. Notify the Shift or Housing Unit Supervisor
  - c. Document all information on an incident report and forward to security and medical personnel

## C. Crisis Intervention Techniques

- 1. When there is reason to believe that an offender fits a suicide potential profile, put crisis intervention techniques into effect.
  - a. Do not judge the offender
  - b. Talk, listen, discuss, keep lines of communication open, and be supportive
  - c. Ask pertinent questions; be direct
  - d. Do not give personal advice or be untruthful
  - e. Do not dare the offender
  - f. Do not act shocked or alarmed
  - g. Refer for professional help
- 2. The following are guidelines to assist in a suicide crisis:
  - a. Recognize the clues hopelessness, helplessness, haplessness
  - b. Trust your judgment you have observed offenders and can recognize changes in behavior
  - c. Listen and be supportive
  - d. Attempt to diffuse the tension and agitation: inject a feeling of hope, but do not lie to the offender

STANDARD OPERATING PROCEDURE	POLICY NUMBER	PAGE NUMBER
DEPARTMENT OF CORRECTION BUREAU OF PRISONS CORRECTIONAL INSTITUTION	190.04	4 OF 4
HOWARD R YOUNG CORRECTIONAL INSTITUTION SUBJECT: OFFENDER MOVEMENT		

- e. Tell others notify medical and supervisory staff
- f. Document all pertinent information in an Incident Report
- D. Suicide Risk Assessment The medical staff will assess an offender's potential for suicide using the following three (3) risk categories:
  - 1. High Risk Engages in self-mutilation which cannot be stopped by removing contraband and/or other material, i.e., banging head on floor or wall, biting or scratching self, attempts to remove body parts.
  - 2. Moderate Risk Exhibits suicidal behavior and/or will not make a "no suicide" contract.
  - 3. Low Risk May have been actively suicidal, i.e., thoughts, plans, movement toward implementing plans, but verbalizes feeling a significant decrease in stress and/or makes a "no suicide" contract.
- E. Housing assignment for suicidal offenders
  - 1. Offenders identified by the medical staff as suicide risks will be assigned to cells designated in the infirmary for suicide observation. Security will maintain a fifteen-minute close observation (eye contact) process. This is to be documented on the close observation form.
  - 2. Suicidal offenders with other medical problems shall be assigned to a cell in the infirmary.
  - 3. Offenders who display suicidal tendencies will be evaluated by the medical health staff for housing assignment.

REVISED: MAY 1, 2005



### LESSON PLAN COVER SHEET

Course Title: Correctional Officer Training

Lesson Plan: Mental Health Overview

Instructor(s): D. Carroll Mental Health Clinician

Prepared by: Dianne Candek RN FCM Nurse Educator

Suggested Day: September 18, 2002

Allowed time: Two hours

Target Population: Delaware CO Cadets

Number of participants: 35

Performance Objectives:

- 1. CO's will understand the categories of mental illness.
- 2. CO's will have a basic understanding of signs of mental illness.
- 3. CO's will be able to recognize signs of potential suicide.
- 4. CO's will be able to appropriately notify mental health staff of potential mental health problems.

Evaluation Procedure:

- 1. Questions and answers.
- 2. Written Test

Presentation Guide:

- 1. Introduction:
  - a. Discussion of some of the more common mental illnesses that may occur in the inmate population.
  - b. Categorizing disorders.
    - Can lead to stigma or bias
    - We should not add to the stigma of mental illness
- 2. Categories of mental illness
  - a. Schizophrenic Disorder:
    - Is a cluster of similar illnesses
    - One of the most devastating illnesses known to man
    - Caused by problems in the chemistry of the brain
    - Characterized by two types of symptoms
      - o Positive
      - o Negative
    - May show a marked decrease in responsiveness to the environment
    - Difficulties in decision making, feeling or showing interest
    - Difficulty socializing

1

First Correctional Medical Proprietary Information, August 2002

- What CO staff can do
  - Refer to Mental Health Staff for evaluation
  - Encourage medication compliance
  - Keep your frustration level low with these patients Decrease stimulation in their environment
- b. Major depressions:
  - Typically characterized by either depressed mood or the loss of interest or pleasure in nearly all activities for a period of at least two weeks.
  - Reduced appetite.
  - Insomnia.
  - Inability to sit still, pacing or hand-wringing.
  - Decreased energy.
  - Unrealistic feelings of worthlessness.
  - What the CO can do:
    - Refer inmate to the Mental Health staff.
    - o Encourage medication compliance.
    - Assess frequently for suicide intent.
- c. Bipolar Disorder
  - Also known as Manic Depressive Disorder
  - Characterized by wide mood swings from manic to depressed.
  - Elevated mood is generally euphoric.
  - Inflated self esteem
  - Decreased need for sleep
  - Increase in goal directed activity
  - Thoughts may race
  - What the CO can do:
    - o Refer the inmate to the Mental Health staff.
    - Encourage medication compliance.
    - Be aware that manic cycles develop rapidly.
- d. Anxiety Disorders
  - Characterized by anxiety, nervousness, worry.
  - Panic attack
    - Sudden onset of intense discomfort, apprehension, terror, often associated with a sense of impending doom. May include the following symptoms:
      - Increased heart rate
      - Sweating
      - Trembling
      - Chest pain
      - Dizziness, lightheadedness
      - Feelings of unreality
  - Generalized anxiety
    - Will feel excessive anxiety and worry for a prolonged period of time, usually greater than six months, about a number of events or activities.
    - Symptoms may include:
      - Restlessness
      - Easily fatigued
      - Difficulty concentrating
      - Sleep disturbance
  - What CO staff can do:
    - Refer inmate to Mental Health staff
    - Encourage medication compliance
    - Be aware that these people are at risk for becoming abusive of, or addicted to their medications.

#### e. Antisocial Personality Disorder

- · A pattern or disregard for, and violation of, the wishes, rights and feelings of
- These persons fail to conform to social norms with respect to lawful behavior and frequently are deceitful and manipulative.
- These individuals tend to be irresponsible in all facets of life, such as work, finances, and family.
- They show little remorse.
- These individuals may appear to be very charming and appear verbal and bright but lack guilt, empathy or sorrow.
- What the CO can do:
  - o Set very firm structure and relationships with these individuals.
  - o Take extra time to investigate stories and requests.
  - o Closely monitor requests for extra medications.
  - o Frequently assess for the presence of substance abuse.
  - o Provide structure, but do it respectfully.

#### f. Borderline Personality Disorder

- These individuals have extreme difficulty maintaining stability in several areas of their lives.
- They have difficulty knowing who they are, what they value, what they like and what they want to do.
- They may rapidly shift moods within a few hours.
- They may have difficulty controlling their anger.
- They may frequently threaten suicide.
- What the CO staff can do:
  - o Be as consistent with these individuals as possible.
  - o Remain focused with these individuals.
  - Respond to crisis as calmly as possible.

#### g. Mental Retardation

- Significant sub-average intelligence accompanied by limitations in adaptive functioning.
- They have difficulty in meeting their own day to day living needs.
- These individuals are diagnosed by a standardized intelligence test.
- An important point to remember is someone may not score well on a test of intelligence due to a lack of education or a different cultural background and this does not necessarily mean they are retarded.

#### 3. Suicide Prevention

- Some of the important issues to become familiar with:
  - Most people who commit suicide have made either direct or indirect statements indicating their suicidal intentions.
  - Most suicidal acts represent a carefully thought out strategy.
  - Most suicidal people are not intent on dying. Part of them wants to remain alive and part of them wants not to die, but for the pain to end.
  - You can not make someone suicidal. Asking a despairing person about suicide shows them that you are interested and you care about them.
  - Statistics show that suicides in custodial settings occur several times (2x to 16x) more often than in the community. Suicide is the number one cause of death in adult detention facilities.
- b. High risk suicide periods in correctional settings:
  - o The first 24 hours of confinement
  - Waiting for trial
  - Sentencing
  - Impending release
  - Holidays
  - Decreased staff supervision

- c. Potential predisposing factors:
  - Recent excessive drinking/use of drugs
  - Recent loss of stabilizing resources
  - Severe guilt or shame over the offense
  - Same sex rape or threat of it
  - Poor health or terminal illness
  - Mental illness
- d. Emotional and behavioral warning signs:
  - Depression
    - Overwhelming pain, hopelessness, helplessness, social isolation, loss of interest in activities previously enjoyed
  - Suicidal behavior
    - Verbal or written statement of suicidal intention
    - Previous suicide attempt
    - Self inflicted injuries
    - Saying good-bye or making statements such as, "You won't have to worry about me anymore" or "I want to go to sleep and never wake up".
- e. What CO staff can do:
  - o Listen: Give the person an opportunity to unburden their troubles and ventilate their feelings
  - Give them relief from being alone with their pain. Let them know that you are glad they turned to you
  - Avoid arguments and advice giving
  - REFER IMMEDIATELY TO MEDICAL/MENTAL HEALTH.
  - If the person is unable/unwilling to keep themselves safe, they will be placed on a suicide watch.

#### f. Suicide Watch

- These inmates are moved to the medical unit or mental health unit.
- They are placed usually in paper gowns, with a canvas suicide blanket and watched constantly or more often, every 15 minutes.
- All means to help them hurt themselves are removed.
- Only finger foods and Styrofoam containers are allowed.
- As their condition improves, their level of suicide watch is gradually made less restrictive.

Corrections Staff Training

# OVERVIEW OF SERIOUS MENTAL ILLNESS

## INTRODUCTION

We're meeting today to talk about some of the more common major mental illnesses that you might see working with the inmate population everyday. The main tool used for identifying/classifying these disorders is the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM IV). The DSM IV loosely defines a mental disorder as "a clinically significant behavioral or psychological syndrome or pattern that occurs in a person and that is associated with distress ( a painful syndrome) or disability (impairment in one or more areas of functioning) or with a significantly increased risk of suffering death, pain, disability or an important loss of freedom." What this means is that someone's psychiatric disorder is causing significant loss of functioning in everyday life, sometimes to the extent that it is putting someone's well-being in danger. Many of the characteristics of the disorders we will talk about today do happen to people everywhere, everyday - just not at the frequency or intensity which makes them a mental illness. We have all felt depressed, anxious, thought we heard a knock at the door, thought someone was talking about us, driven for a period of time without realizing how we got there, etc. Recognizing this can help you to be more empathic in your work - recognizing that we are more alike than we are different.

Each person we encounter brings with them a cultural background which has an effect on their life and the expression of their symptoms. Some symptoms are described or expressed differently in different cultures. Additionally, many behaviors or beliefs which may be considered abnormal by the dominant culture, are within the normal range of beliefs or behaviors of an individual's culture. Examples? It is always important to be sensitive to what a behavior or belief means to an individual in reference to their cultural background.

Categorizing disorders does not mean categorizing people. Categorizing people can lead to stigma, or bias against an individual because of characteristics attributed to them. People with mental illness are one of the most stigmatized groups in the world. The stigma affects their feelings about themselves, their hopefulness about whether or not they can recover, and their ability to form relationships with others. It is important, when working with inmates with major psychiatric disorders, to do so in such a way that we do not add to the stigmatization. Be careful of the language you use. Instead of calling them a schizophrenic, or depressive, or borderline, or worse, crazy, nuts, etc., we might better refer to them as a person - a person with a disorder or disability. Also remember that there is no assumption that all individuals described as having the same mental disorder are alike in all important ways. People are individual. Their individual traits and histories will define their needs as much as their individual illness. Take time to get to know the

Corrections Staff Training

person. If you remain focused on individuality, it becomes hard to generalize or stigmatize.

# CATEGORIES OF MENTAL DISORDERS

The DSM IV divides mental disorders into several categories, which are further divided onto different axes or dimensions. On Axis I, we find the major psychiatric diagnosis. These are acute episodes of illness, which are typically treatable with medication, psychotherapy, or some combination of the two. This would include things like Schizophrenic Disorder, Depressive Disorder, Bipolar Disorder, and Auxiety Disorders. Substance abuse or dependence is also recorded on Axis I. Axis II records Personality Disorders, such as Antisocial Personality Disorder and Borderline Personality Disorder (two of the more common you might see in the inmate population). These are enduring, habitual ways of perceiving, thinking about, and relating to the world and ourselves. These conditions tend to be more difficult to manage clinically. Also included on Axis II is Mental Retardation.

#### Axis I Disorders

Schizophrenic Disorder: Probably not a single illness, but a cluster of similar illnesses, each with its own course and prognosis. One of the most devastating illnesses known to man, because it affects so many areas of a person's life and can create tremendous disability. Also one of the illnesses least understood by the general public, causing great fear and stigma. Schizophrenic Disorder is caused by problems in the chemistry of the brain. Medications that people are on directly affect the production of these chemicals in the brain. There is evidence that there is a strong genetic component to the development of this disorder, however non-genetic factors also play a role. Schizophrenic Disorder typically first strikes an individual during the late adolescent or early adulthood years. Because this is such an important age period for our development, Schizophrenic Disorder may create disabilities in the development of many adult activities. Once thought to be part of the illness, these deficits are now understood to be the result of the illness interrupting appropriate development during this stage. Therefore, we can assist people with Schizophrenic Disorder to overcome some of the difficulties of their illness.

Schizophrenic Disorder is characterized by two types of symptoms which are called positive and negative symptoms. Positive symptoms are not "good" symptoms. They are active, present signs of disruption in the thinking and sensory processes of the brain. They represent an excess or distortion of normal functioning. Negative symptoms appear to be a lessening or loss of normal functions. It is important to realize that this is a highly individual illness, and people will have varying manifestations. Some people may have only one or two symptoms and very mild disturbances in everyday functioning, while other people may have problems in many areas. That is why it is important to consider each individual's disabilities, as well as assets, so that we might help them to build upon and maximize their intact areas of functioning.

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of auditory hallucinations, you should always refer the person to a physician to rule out a medical cause.

Affect: A person experiencing Schizophrenic Disorder may display a flat, immobile, unresponsive facial expression, with poor eye contact, monotone speech, and reduced body language ("affective flattening"). Although a person with affective flattening may smile and warm up occasionally, their range of emotional expressiveness is clearly diminished most of the time. Other times, the person may laugh, cry, or have outbursts of anger, apparently unrelated to what is happening ("inappropriate affect").

Movement and Activity: With Schizophrenic Disorder may come a disturbance in a person's ability to move normally. People may show a marked decrease in responsiveness to the environment, which can reach the point of total unawareness, and may be slowed down, sometimes to the point of immobility ("catatonia"). There may be posturing, odd movements, gesturing, grimacing, or purposeless and unstimulated excessive motor activity. Important to be aware that movement problems may be related to medication side effects. Disorganized behavior may lead to problems in any type of goal directed behavior, so that people may have difficulties performing activities of daily living, such as maintaining hygiene. They may appear disheveled or unusual. They may have difficulties initiating or self-directing activity, making decisions, or feeling/showing interest. This can frequently be frustrating for staff. It is important to remember that this is a symptom of the illness, not a deliberate attempt to be frustrating. People with Schizophrenic Disorder are coping with a number of difficult things, and often have difficulty socializing. Withdrawal and detachment are common interactional styles. Conversely, they sometimes can be intrusive and fail to recognize limits of personal space.

#### WHAT STAFF CAN DO:

- 1. If you recognize these signs of Schizophrenic Disorder, refer immate to mental health for evaluation.
- 2. Encourage medication compliance.
- 3. Schizophrenic Disorder is expressed through difficulties processing information. Be clear and concrete in what you are saying to people. Check to insure that you have heard them correctly, and that you have been heard correctly.
- 4. Be respectful. Being simple and concrete does not mean talking to people as though they are children or are unable to understand, rather, it is giving information in a way that it is easily absorbed.
- Keep your emotion and frustration level low. Do not respond to people with high levels of emotion. Allow yourself enough time to interact with people without rushing them.
- 6. Meet the person where they are. Do not insist that they adopt your version of reality.
- 7. Decrease stimulation in the immediate environment.
- 8. Schizophrenic Disorder and its symptoms can be very frightening to the person experiencing it. Provide support and security when someone is experiencing

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Areas of functioning which may be affected by Schizophrenic disorder include:

Thinking: Inference of disordered thinking is usually based primarily on the individual's speech. Disorganized thinking may manifest in a variety of ways. Speech may shift from one topic to another without any apparent awareness that the ideas are unrelated ("derailment," "looseness of associations"), or disturbance might occur within a clause, so that words or phrases are joined together without logical connection ("incoherence," "word salad"). Answers to questions may be only slightly, or not at all related ("tangentiality"). People may be speaking a normal amount, but giving very little information because they are so vague ("poverty of thought"), or may be unable to communicate or find an idea at all ("thought blocking"). Additionally, people may go over and over the same information, unable to move from a subject ("perseveration"), or may use non-words to convey meaning ("neologisms").

Disturbances in thinking may also involve delusions, which are false, fixed beliefs. These are erroneous beliefs that most people in a person's culture would regard as totally implausible. The content of these delusions may include any of a variety of themes. People may believe that they are being conspired against, tormented, attacked, harassed, cheated, followed, tricked, spied on, or subject to ridicule ("persecutory," "paranoid"). Other times, people may believe that certain gestures, comments, passages from books, newspapers, song lyrics, movies, television programs, or other environmental cues are specifically directed at them ("reference"). Other common delusions seen with Schizophrenic Disorder are the belief that your body or actions are being acted on or manipulated by some outside force ("control"), that outside thoughts have been put into your mind ("thought insertion"), that your thoughts have been taken away by some outside force ("thought withdrawal"), or the belief that one's thoughts are being broadcast out loud so that they can be perceived by others ("thought broadcasting"). Less common are thoughts of inflated power, worth, knowledge, identity or special relationship to a deity or famous person ("grandiose"), or thoughts pertaining to the appearance or functioning of the body ("somatic").

Perception: People with Schizophrenic Disorder may have difficulty accurately perceiving reality, including experiencing various types of hallucinations - a false sensory experience. Hallucinations may occur in any sensory modality (auditory, visual, olfactory, gustatory, tactile), but auditory hallucinations are by far the most common and characteristic of Schizophrenic Disorder. Auditory hallucinations are usually experienced as voices, whether familiar of unfamiliar, which the person perceives as distinct from their own thoughts, and which the person hears as coming from outside their head. The content might be quite variable, although threatening or pejorative voices are quite common. Often these voices speak directly to the person and comment on their behavior. The voices may command the person, which may create danger for the person or for others. When hallucinations occur in other sensory modalities, especially in the absence

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frightening symptoms. Help someone to feel safe by using a soft voice, a non-threatening posture, and slow hand gestures. Let the person know what you are doing and why you are doing it. Reassure them. Do not use this as a time to argue with someone about what they are perceiving to be real.

Get to know the person behind the illness. Remember, Schizophrenic Disorder occurs
in a pattern of exacerbation and remission. Hardly anyone is ill all the time.
Recognize when people are doing well. Build on a person's strengths and areas of
wellness.

Major Depression: While you might expect someone in a correctional setting to experience some depression as a normal response to their circumstance, sometimes these feelings become so intense or prolonged as to cause a major disruption in a person's day to day functioning. A Major Depressive Episode is typically characterized by either depressed mood or the loss of interest or pleasure in nearly all activities for a period of at least two weeks. These feelings occur for most of the day, nearly every day. The mood is often described as depressed, sad, hopeless, or discouraged. Some individuals emphasize somatic complaints, such as body aches or pains, while many report or exhibit increased irritability. Loss of interest or pleasure is almost always present to some degree, with the person reporting not caring anymore or not feeling any enjoyment in activities that were previously considered pleasurable. In addition, the person must experience at least four additional symptoms drawn from a list that includes:

Appetite: Usually reduced, with many individuals having to force themselves to eat. Others may report increased appetite, and may have specific cravings. Severe appetite changes in either direction may result in significant loss or gain in weight.

Sleep: Most common sleep disturbance is insomnia. Individuals typically wake too early and are unable to fall back asleep, or wake in the middle of the night, with difficulty returning to sleep. Difficulty falling asleep initially may also occur. Less frequently, individuals oversleep, with prolonged nighttime sleep or increased daytime sleep.

Movement and Activity: Motor changes may include the inability to sit still, pacing, or hand-wringing ("Psychomotor agitation"), or slowed body movements, speech, and thinking ("Psychomotor retardation"). Agitation or retardation must be severe enough to be observed by others, not simply subjective feelings of the individual.

Emergy: Decreased energy, tiredness, and fatigue are common. Even the smallest tasks may require substantial effort. Individual may complain of exhaustion without physical exertion. Efficiency of task accomplishment may be reduced.

Sense of Self: Unrealistic feelings of inadequacy, worthlessness, self-blame, or guilt. The person may often look to cues in their environment to confirm these bad feelings about themselves. May misinterpret neutral or trivial events as evidence of personal defects, or have exaggerated sense of personal responsibility for events.

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Thinking: Many individuals report impaired ability to think, with poor concentration and attention, and indecisiveness. They may appear easily distracted or complain of memory difficulties.

Suicide: May have recurrent thoughts of death, believing that life is not worth living or that others would be better off without them. This may lead to suicidal thoughts or attempts.

Additionally, with severe depression, individuals may suffer from delusions or hallucinations. These are typically Mood Congruent, and could include the believe that you are evil or responsible for world tragedies, or that your body is rotting. Hallucinations are typically voices which harass the individual with accusations of personal failings, or encouraging suicide.

#### WHAT STAFF CAN DO:

- 1. If you recognize these signs of Major Depressive Disorder, refer inmate to Mental Health for evaluation.
- 2. Encourage medication compliance.
- 3. Remember that symptoms are part of an illness over which person has little control. This is not a sign of weakness or lack of character. Patience, respect, and care go a long way toward helping someone with a Major Depression.
- 4. Do not argue with self-perceptions, which may be a symptom of the disorder. It is more useful to help person develop some positive coping skills.
- 5. Assess frequently for suicidal ideation or intent.

Bipolar Disorder: Also know as Manic-Depressive Disorder, as it is characterized by wide swings of mood from manic to depressed. A manic episode is characterized by a distinct period where there is an abnormally and persistently elevated, expansive mood. The elevated mood may be described as euphoric, unusually good, or high. In addition, the mood disturbance must be accompanied by at least three additional symptoms from a list that includes:

Sense of Self: Inflated self-esteem is typically present, ranging from uncritical self-confidence to marked grandiosity, which may reach delusional proportions. Individuals may give advice on matters about which they have no special personal knowledge, or may embark on a task for which they have no particular experience or talent. Grandiose delusions are common, such as having a special relationship with God or some important figure, or being God or some important figure.

Sleep: Almost invariably, there is a decreased need for sleep, with people going for up to days without sleep, and yet not feeling tired. Feel full of energy.

Movement and Activity: Increase in goal directed activity. Often involves excessive planning of, and participation in multiple activities. May take on multiple new ventures,

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increase sociability, and imprudently become involved in pleasurable activities with no regard for possible consequences. This might include recklessness, buying sprees, sexual indiscretions, etc. Speech is pressured, loud, rapid, and difficult to interrupt. May be a nearly continuous flow of accelerated speech, with abrupt changes from one topic to another. This is because...

Thinking: Thoughts may race, often at a faster rate than can be articulated. There may be a reduced ability to differentiate between thoughts that are relevant to the topic from those that may not be. There is an inability to screen out external stimulation, so the individual may be distractible.

People with mania often do not recognize that they are ill, and resist efforts to intervene. They may rapidly shift to anger, irritability, or depression, especially when they are thwarted. They may make suicidal threats or gestures.

## WHAT STAFF CAN DO:

- 1. If you recognize these signs of Bipolar Disorder, refer inmate to Mental Health for evaluation.
- 2. Encourage medication compliance.
- 3. Be aware that manic cycles usually develop rapidly. Early intervention in the cycle may prevent full blown mania.

Anxiety Disorders: Anxiety Disorders are characterized, not surprisingly, by anxiety, nervousness, worry. These are the symptoms most common in the general population, and for which the most psychiatric prescriptions are written each year. It is also not surprising that such symptoms would be common in a correctional setting. Like depression, this might be a normal reaction to the circumstance. However, sometimes the symptoms become so intense or prolonged as to create a serious disruption in a person's day to day functioning, and may require intervention.

A Panic Attack is a discrete period in which there is a sudden onset of intense discomfort, apprehension, fearfulness, or terror, often associated with a sense of impending doom. The discomfort may include symptoms, such as:

- 1. palpitations, pounding heart, or accelerated heart rate
- 2. sweating
- 3. trembling or shaking
- 4. sensations of shortness of breath or smothering
- 5. feelings of choking
- 6. chest pain or discomfort
- 7. nausea or abdominal distress
- 8. feeling dizzy, unsteady, lightheaded, or faint
- feelings of unreality (derealization) or being detached from oneself (depersonalization)

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- 10. fear of losing control or going crazy
- 11. fear of dying
- 12. numbress or tingling sensations (paresthesias)
- 13. chills or hot flushes

Generalized Anxiety occurs when a person feels excessive anxiety and worry, more days than not, for a prolonged period of time (greater than six months), about a number of events or activities. The person finds it difficult to control the worry and anxiety, which is associated with three or more of the following symptoms:

- 1. restlessness or feeling keyed up or on edge
- 2. being easily fatigued
- 3. difficulty concentrating or mind going blank
- 4. irritability
- 5. muscle tension
- 6. sleep disturbance (difficulty falling or staying asleep, or restless, unsatisfying sleep)

#### WHAT STAFF CAN DO:

- 1. If you recognize these signs of an Anxiety Disorder, refer immate to Mental Health for evaluation.
- Encourage medication compliance. Be aware, though, that people with anxiety disorders are at risk for becoming abusive of, or addicted to their medication. It is important to help them monitor medication use.
- 3. Help person to develop and use additional, non-medication coping strategies for their illness, such as relaxation.

#### Axis II Disorders

Each of us has a personality and personality traits. Personality traits are our enduring, or habitual, ways of perceiving, thinking about, and relating to the world and oneself. We tend to be consistent in these patterns through a wide range of situations, but also have some flexibility in our approach to situations, particularly if our usual way is not working. A person is considered to have a personality disorder when their way of interpreting the world and acting in it is inflexible, not adaptive to situations, and causes them significant distress or problems in everyday life functioning. These difficulties are not brief or transitory, but are stable, enduring, and characteristic of the person's long term functioning, across a broad range of personal and social situations.

Antisocial Personality Disorder: A pervasive pattern of disregard for, and violation of, the wishes, rights, and feelings of others. People with Antisocial Personality Disorder fail to conform to social norms with respect to lawful behavior, and frequently are deceitful and manipulative in order to gain personal profit or pleasure. They may repeatedly lie, use an alias, con others, or malinger. Decisions may be made on the spur of the moment, with no forethought or consideration of the consequences to self or others. Tend to be

irritable and aggressive, and may repeatedly get into fights or commit acts of physical assault. These individuals display a reckless disregard for their safety or the safety of others, which may be manifested through such things as speeding, DUI's, substance use, or sexual behavior that has a high risk for harmful consequences. They tend not to have monogamous relationships, or to follow through on their responsibilities to family or children. Individuals with Antisocial Personality Disorder tend to be consistently irresponsible in all facets of life, such as work, finances, and family. They show little if any remorse for the consequences of their acts. May be indifferent to, or provide superficial rationalizations for having hurt, mistreated, or stolen from others ("life's unfair," "they had it coming," "losers deserve to lose"). They may superficially appear quite personally charming, and appear verbal and bright, but lack any empathy, guilt, or sorrow for the consequences they cause others.

#### WHAT STAFF CAN DO:

- Set very firm structure around your interactions and relationships with the person. Be as predictable and consistent as you can.
- 2. Take extra time to investigate stories and requests.
- 3. Closely monitor requests for extra medication.
- 4. Utilize natural consequences.
- 5. Frequently assess for the presence of substance abuse problems (even here).
- 6. Take care in placement. Don't place someone who could be victimized with an antisocial cellmate.
- 7. Provide some of the structure and control which the person is unable to provide for themselves, but do it respectfully, with the intention to assist rather than control.

Borderline Personality Disorder: A person is said to have Borderline Personality Disorder when they have pervasive and extreme difficulty maintaining stability in several areas of their lives. They have a sense of impending separation, rejection, or abandonment, or loss of structure, which they make frantic efforts to avoid, and which can lead to profound changes in self-image, mood, thought, and behavior. They have difficulty knowing who they are, what they value, what they like, what they want to do, what kind of person they want a relationship with ("unstable sense of self"). They may move from overvaluing, idealizing a person, wanting to spend a great deal of time together, very quickly to devaluing the person, feeling that the other does not care enough, is not there enough, does not give enough ("unstable sense of others"). They may rapidly shift moods, within a few hours, rarely more than a few days ("unstable sense of emotion"). People with Borderline Personality Disorder tend to impulsively act in ways that can be harmful to them, such as overspending, substance abuse, casual sex, binge eating, or recklessness. They may have great difficulty controlling their anger, which is often intense and out of proportion to the situation causing it. People with Borderline Personality Disorder may experience a sense of boredom or emptiness, and may sometimes feel as though they do not exist at all. They may frequently threaten suicide, make suicidal gestures, or engage in self-mutilation, such as cutting or burning the skin. These behaviors may be manipulative, but also may be their attempt to express anger, or

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to overcome the numbness and emptiness that they feel. People with Borderline Personality Disorder are often difficult and frustrating to work with.

## WHAT STAFF CAN DO:

1. Remember, this is a very uncomfortable and painful way to live.

Be as consistent as possible. No matter how the person is feeling (likes you/hates you, happy/depressed), you should be the same person - patient, helpful, and calm.

3. Remain focused. Listen to the person's concerns, but try not to get too side-tracked. Remain consistently supportive, without taking sides.

4. Respond to crisis as calmly and predictably as possible.

5. Recognize your role in conflict, and your responses which might exacerbate a situation. People with Borderline Personality Disorder may evoke strong emotional responses from others. It is part of your professional role to engage in self-examination, and to respond professionally, not in anger, or with overstepping professional limits.

Also looked at on Axis II is Mental Retardation. The essential feature of Mental Retardation is significantly subaverage intelligence, as measured by a standardized intelligence test, accompanied by significant limitations in adaptive functioning. Adaptive functioning refers to how effectively individuals cope with common life demands, and how well they meet the standards of personal independence expected of someone in their particular age group, cultural background, and community setting. This would include such areas as self-care, communication, social skills, work, safety, self direction, health, etc. The important point to keep in mind here is that there are many reasons why someone may not score well on a test of intelligence, from lack of education to different cultural background. This does not make them Mentally Retarded. In order to be diagnosed, considered Mentally Retarded, you must also not be able to meet your own day to day living needs. This is an important distinction in how we think about people.

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# SUICIDE PREVENTION

Suicide may be associated with a wide variety of inmates and situations, so it is important to become familiar with the issues around suicide and suicide prevention.

MYTH: People who make suicidal statements/threaten suicide don't commit suicide. FACT: Most people who commit suicide have made either direct or indirect statements indicating their suicidal intentions. More than 75% of all completed suicides did things in the few weeks or months prior to their deaths to indicate to others that they were in deep despair.

MYTH: Suicide is an impulsive act in response to an immediate situation/happens suddenly and without warning.

FACT: Most suicidal acts represent a carefully thought out strategy for coping with serious personal problems.

MYTH: People who attempt suicide have gotten it out of their system and won't attempt it again.

FACT: Four out of five persons who kill themselves have made at least one prior attempt.

MYTH: If someone is going to kill themselves, there's nothing you can do to stop them. FACT: Most suicidal people are not intent on dying. They are ambivalent about living. Part of them wants to remain alive (the part that is telling you), and part of them wants, not to die, but for the pain they are in to end.

MYTH: Talking to somebody about suicide may give them the idea/cause them to kill themselves.

FACT: People already have the idea. You can not make someone suicidal. Asking a despairing person about suicide shows them that you are interested and care about them, that you take them seriously, and that you are willing to let them share their pain with you.

MYTH: Suicide happens less frequently in the structure of a jail/prison setting.

FACT: Statistics show that suicides in custodial settings occur several times (2x to 16x) more often than in the community. Suicide is the number one cause of death in adult detention facilities.

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## HIGH RISK SUICIDE PERIODS IN CORRECTIONAL SETTINGS

- 1. The first 24 hours of confinement: This is the most crucial period, especially the first 3 hours.
- 2. Waiting for trial: Waiting and the unknown can produce great anxiety/stress for many people.
- 3. Sentencing: The day of reckoning. Can be a breaking point for some inmates, including the repeat offender, who knows what kind of life to expect in prison, and can not bear the thought of returning.
- 4. Impending release: This can catch staff off guard, as this is usually considered something to look forward to. For some people, the adjustment back into the community may be difficult ("institutionalized"). The stigma of facing family, friends, or coworkers may feel too great. Severe guilt or shame may outweigh what we would consider the positives of release.
- 5. Holidays: Holidays often mean loved ones gathering together. This can add to the loneliness felt by immates.
- 6. Decreased staff supervision: Many times, less staff is on duty during weekends, nights, and holidays. Suicide is a private act, and often occurs during these times. Fewer programs and activities also affect the atmosphere of the institution.

#### POTENTIAL PREDISPOSING FACTORS

- Recent excessive drinking/use of drugs: Depression may set in when an immate sobers up. In other cases, some drugs and alcohol can have a depressing effect. In yet other cases, alcohol/drugs can affect judgment and impulse control. All of these cases can influence suicide.
- 2. Recent loss of stabilizing resources: Wife/husband/loved one/parent, job, home, finances, status, self-esteem.
- 3. Severe guilt or shame over the offense: While some immates involved in serious crimes commit suicide, most who take their own lives in prison are charged with relatively minor offenses. Guilt or shame may be inversely proportionate to the seriousness of the offense. Persons of high status in the community who commit shameful crimes, such as child molestation or sexual assault may need especially close attention.
- Same sex rape or threat of it: Many inmates who were prevented from committing suicide reported, on interview, that they had been raped or leaned on heavily for sexual favors.
- 5. Poor liealth or terminal illness: While mainly a problem of the elderly, persons of all ages can become depressed when seriously ill.
- 6. Mental illness: While many people who do not suffer from serious mental illness do commit suicide, people who are severely depressed or suffer from delusions/hallucinations, with voices telling them what to do are at high risk for suicide.

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### **EMOTIONAL AND BEHAVIORAL WARNING SIGNS**

- 1. Depression: Overwhelming pain, hopelessness, helplessness, social isolation, loss of interest in activities previously enjoyed, tearfulness, apathy, and other signs and symptoms of Major Depression. Sometimes, the early stages of recovery from depression can be a high risk period, because people may have the energy to act on their feelings. Depression that seems to quickly disappear for no apparent reason may be cause for concern, as it may suggest that the person has found relief in decision to suicide.
- 2. Suicidal behavior: Verbal or written statement of suicidal ideation or intent. Previous suicide attempts. Self-inflicted injuries, which may be an attempt to manipulate, but could actually be severe enough to cause accidental death. Saying good-bye, or making ambiguous/indirect statements, such as "You won't have to worry about me anymore," or "I'm going away," or "I want to go to sleep and never wake up". Giving away possessions. Development of a suicide plan, especially if there is access to means.

#### WHAT STAFF CAN DO

- 1. Listen. Give the person the opportunity to unburden their troubles and ventilate their feelings. You don't need to say much, and there are no magic words. If a suicidal person turns to you, it is likely that they believe that you are caring. No matter how negative the manner and content of their talk, they are doing a positive thing by turning to you, and they have a positive view of you. If you are concerned, your voice and manner will show it. Give them relief from being alone with their pain. Let them know that you are glad that they turned to you. Patience, sympathy, and acceptance. Avoid arguments and advice giving.
- 2. Refer immediately to Medical/Mental Health. If the person is unwilling/unable to keep themself safe, they will be placed on a Suicide Watch.

#### SUICIDE WATCH

Inmates placed on a suicide watch are moved to a safe area (Medical Isolation or Segregation), where they are placed in paper gowns, usually with a canvas suicide blanket, and watched as much as constantly, but usually every 15 minutes. All other means by which they could hart themselves are removed, to the extent that they are given only finger foods in Styrofoam containers. As their condition improves with treatment, the level of suicide watch is gradually made less restrictive. They may be given a mattress, some clothing, and regular food trays with utensils. They are watched with less frequency, from every 15 minutes, to every 30 minutes or every hour. Eventually, as the crisis passes, their privileges are completely restored, with a return to their previous housing status.

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# SHORTNESS OF BREATH

- Can be caused by multiple problems including cardiac, diabetic and pulmonary problems. Should be addressed to the medical staff IMMEDIATELY. This is a potentially life-threatening situation.
- ✓ If an inmate is known to have respiratory problems and has an inhaler available to him/her, he/she should have immediate access to the inhaler.

# **DRUG & ALCOHOL WITHDRAWAL**

✓ Alcohol withdrawal symptoms include:

Drug withdrawal symptoms

include:

Confusion

Nausea and vomiting

Nausea Trembling

Abdominal pain Profuse sweating

Nervousness

Agitation

Hallucinations

Tremors

Hallucinations Seizures

Seizures

✓ Notify the medical staff IMMEDIATELY if you even suspect someone is beginning to withdraw from alcohol (potentially life threatening) or drugs.

# HANGING ATTEMPT

- ✓ IMMEDIATELY move the inmate to the floor.
- ✓ Loosen anything that is around the neck area.
- ✓ Call for medical assistance
- ✓ Begin CPR IMMEDIATELY, if there is no pulse or breathing

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STATE OF DELAWARE
DEPARTMENT OF CORRECTIONS
EMPLOYEE DEVELOPMENT CENTER
245 MCKEE ROAD
DOVER, DELAWARE 19904
Telephone: (302) 739-5601
Fax: (302) 739-5751

# **LESSON PLAN AUTHORIZATION**

COURSE TITLE:	CEIT	
LESSON PLAN TI	TLE: Hanging Sit	uations (strangulation)
DATE OF ORIGINA	AL: 05/09/90	
PREPARED BY:	Fred Franze/Tony	r Figario
REVIEWED AND	UPDATED BY: Fred	Franze/Tony Figario
DATE: 09/14/06	3	
APPROVALS:		
Hamen Mic	ee askii	DATE: 10/2/06
	my Administrator	•
Marall &	& Saul	DATE: 9/25/06
Training Admin	listrator II	
		DATE:
Training Admin	istrator II	

# DELAWARE DEPARTMENT OF CORRECTION EMPLOYEE DEVELOPMENT CENTER LESSON PLAN

COURSE TITLE: CEIT

LESSON TITLE: Hanging Situations (strangulation)

PREPARED BY: Fred Franze/Tony DATE: 5/9/90 Revised 9/14/06

Figario

#### TIME FRAME

Hours: 30 Minutes

#### **PARAMETERS**

Audience: Security and Support personnel working inside secured areas

Number: As Required

Space: As Required

#### PERFORMANCE OBJECTIVES

- 1. Be able to identify parts of a body affected by hanging.
- 2. Be able to do ABC assessment.
- 3. Be able to perform basic emergency care for a hanging victim.

4

# **EVALUATION TECHNIQUE**

- 1. Perform assessment and basic emergency care for a hanging victim.
- 2.
- 3.
- 4.

NIC Lesson Plan

Page 2

#### INSTRUCTOR MATERIALS

Overheads DVD of CPR

Videotapes:

Slides

**Posters** 

Reference Documents:

# EQUIPMENT/SUPPLIES NEEDED

Flipchart & stands

Videotape player

Flipchart Markers

Videocamera

Masking tape

Televisions X

Slide projector

(Carousel)

Videoshow X

Overhead projector

Computers X

Projector screen X

# STUDENT HANDOUTS

# Needed: As needed Title Hanging attempt

#### **NIC Lesson Plan**

Page 3

METHODS/TECHNIQUES

Illustrated lecture, skill demonstration, skill practice with rescue manikin.

#### REFERENCES

The following books and other materials are used as a basis for this lesson plan. The instructor should be familiar with the material in these reference documents to effectively teach this module.

Title

Author

1. CPR/AED Instructor manual

1. American Safety & Health Institute

2.

2.

3.

3.

#### **GENERAL COMMENTS**

In preparing to teach this material, the instructor should take into consideration the following comments or suggestions.

Department of Correction Employee Development Center LESSON PLAN TITLE: Hanging Situations (Strangulation)

PRESENTATION GUIDE

TRAINER NOTES

#### I. SET

This training is mandatory for all security and support personnel working inside secure areas or have access to, or reason to be in secure areas where inmates are housed.

The purpose is to help prevent fatalities from hangings If trained personnel are on hand to immediately aid the hanging victim, some if not all fatalities may be prevented.

# II. INSTRUCTIONAL INPUT

- A. In the prison setting is not uncommon for detainees or sentenced offenders to attempt to commit suicide.
- B. Staff members must be alert for hanging attempts and be able to render appropriate emergency care.
- C. Staff must be alert for anything in the offender's surroundings that could be used to facilitate a suicide:

Department of Correction Employee Development Center LESSON PLAN (ITLE: Hanging Situations (Strangulation)

PRESENTATION GUIDE

TRAINER NOTES

- 1. Exposed overhead pipes or other objects that could be used to support the weight of a human body suspended by a bed sheet or rope or other object used in a hanging attempt.
- D. Action following discovery of an attempted hanging:
  - 1. Support the hanging person by wrapping your arms around the body and lifting the person enough to remove the strain on the neck.
  - 2. Call for help in a voice loud enough to be heard by other staff members in the area.
  - 3. When help arrives, have the staff member call for medical assistance and locate and bring the special tool used to cut through the bed sheet or other material used in the hanging attempt.
  - 4. While waiting for the arrival of the special tool, try to take the victim

Department of Correction Employee Development Center LESSON PLAN
TITLE: Hanging Situations (Strangulation)

PRESENTATION GUIDE

down by any means possible:

#### TRAINER NOTES

- a. Loosen the material from the victim's neck.
- b. Slip the victim's head out of the "noose" if possible.
- c. Remove the material from the point of suspension if possible, then loosen and remove the "noose" from the victim's neck
- 5. Immediately do an ABC assessment as you were taught in CPR training to determine the condition of the victim.
- 6. If necessary, perform CPR until medical help arrives.
- 7. Time is absolutely critical in these situations so action must be immediate.
- 8. When medical help arrives, try to give them an estimate of how long the victim had been hanging and describe what emergency care you gave.
- 9. In no instance should the victim be

Department of Correction Employee Development Center LESSON PLAN
FITLE: Hanging Situations (Strangulation)

PRESENTATION GUIDE

ON GUIDE TRAINER NOTES

#### left alone.

- 10. Assume that a spinal injury has occurred and take appropriate precautions as you were taught in the "First Aid Course:
  - a. Handle the victim with
    extreme care being sure to
    manipulate the spine
    (particularly the cervical
    spine) as little as possible.
  - b. The victim should be lying supine (flat on his/her back so that CPR may be properly performed if necessary.

III. GUIDED PRACTICE If time and space permit, use the rescue dummy for a practical exercise.

# IV. EVALUATION/CLOSURE

Remember – suicide attempts, particularly hanging attempts, are not at all uncommon. It is the responsibility of correctional staff to be

Department of Correction Employee Development Center LESSON PLAN TITLE: Hanging Situations (Strangulation)

PRESENTATION GUIDE	TRAINER NOTES
Aware of this and know how to handle these	
situations.	
All security and support personnel should be	·
properly trained in CPR/AED and Basic First	
Aid. All personnel must be aware of the	
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Case 1:06-cv-00104-JJF Document 51-3 Filed 10/15/2007 Page 45 of 64

Depa	rtment of (	Correction En	ployee Development Center LESSON PLAN
ITLE:	Hanging	Situations	(Strangulation)

PRESENTATION GUIDE	TRAINER NOTES
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Page 9

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# **Hanging Attempt**

A hanging attempt may affect any or all of the structures in the neck. These include airway, spinal cord, and the major blood vessels, which bring blood to the head. All of this must be considered when caring for the hanging victim.

# Actions to Follow a Hanging Attempt

- 1. Extricate the victim (Take him down) Protecting the head and neck as much as possible.
- 2. Have someone call an ambulance now.
- 3. Give basic First Aid (See Below)

#### First Aid

- 1. Monitor and maintain open airway
  - a. Look, listen; feel for breathing if subject is unconscious.
  - b. Maintain an open airway; if necessary use the modified jaw thrust technique do not tilt the head back.
    - i. Place your fingers behind the angles of the lower jaw.
    - ii. Forcibly bring the lower jaw forward.
    - iii. Use your thumbs to pull the lower lip down to allow breathing through the mouth as well as the nose.
  - c. Give artificial ventilation, if necessary, while continuing maintenance of open airway using jaw lift.
- 2. If there is no pulse, do chest compressions.
- 3. Assume a spinal cord injury and handle accordingly.
  - a. Place victim flat on floor with head stabilized.
  - b. Do not let victim or anyone else lift or twist victim's head.
  - c. Give the victim nothing by mouth.
- 4. Do not leave the victim alone.
- 5. CPR masks are provided in the first aid kits provided in each institution. Don't hesitate to use them.

# Remember:

A suicide attempt is a serious matter, regardless of how you feel about the victim's attempt to take his own life. Do not belittle him/her or make sarcastic remarks. If you do this you might aggravate an already bad emotional situation.

A suicidal inmate needs psychological help. If possible get him/her this help right away or as soon as his/her physical condition permits.



# **EMOTIONAL & BEHAVIORAL WARNING SIGNS**

Depression: Overwhelming pain, hopelessness, helplessness, social isolation, loss of interest in activities previously enjoyed, tearfulness, apathy and other signs and symptoms of Major Depression. Sometimes, the early stages of recovery from depression can be a high risk period because people may have the energy to act on their feelings. Depression that seems to quickly disappear for no apparent reason may be cause for concern, as it may suggest that the person has round relief in the decision for suicide.

Suicidal Behavior: Verbal or written statement of suicidal ideation or intent. Previous suicide attempts, Self-inflicted injuries which may be an attempt to manipulate but could actually be severe enough to cause accidental death. Saying good-bye or making ambiguous/indirect statements such as "You won't have to worry about me anymore" or "I'm going away" or "I want to go to sleep and never wake up." Giving away possessions. Development of a suicide plan, especially if there is access to means.



# <u> JAIL & PRISON SUICIDE RESEARCH</u>\*

#### Jail Suicide Statistics

- O There are 400-600 jail suicides (excluding state/federal prisons) per year, and suicide is the leading cause of death in most jails throughout the country.
- O During the 1980's, the suicide rate in county jails was ~ 107/100,000 inmates (9 times > community rates).
- O During the 1990's, the suicide rate in county jails dropped dramatically and in 1999 was 54/100,000 (4.5 times > community rates) (BJS, 2001).
- 75% of suicides are detained on non-violent charges
  - o 60% of suicides are intoxicated at the time of confinement
- 51% of suicides occur within the first 24 hours of confinement and 29% occur within the first 3 hours
  - o 67% of suicides are in isolation at the time
- 50% of suicides occur within 3 days of a court hearing (Marcus & Alcabes, 1993)
- 94% of suicides are by hanging

#### Prison Suicide Statistics

- There are nearly 200 prison suicides/year, and suicide is the 3<sup>rd</sup> leading cause of death in prisons, behind natural causes and AIDS.
- o In 1999, the suicide rate in state and federal prisons was 15/100,000 inmates (slightly higher than community rates); this reflects a slight drop from 1984-1993.
- The majority of prison suicides are by persons with documented histories of mental illness and suicidal behavior.
- o 64% of completions had one attempt during confinement; 56% had > 3 attempts during confinement (Yan-He, 2001).
- Most suicides were by persons serving terms of ≥ 10 years but occurred between 6 months to 2 years of confinement.
- The majority of suicides occurred in "special housing units," such as disciplinary segregation or protective custody
- \*Adapted from Hayes, Lindsay M. (2003). "Toward a Better Understanding of Suicide Prevention in Correctional Pacilities," ACA Winter Conference, Charlotte, NC.

#### **Important Factors**

- High risk of suicide in chronic schizophrenia during periods of acute psychosis
- Suicidal impulses in borderline personalities are most common when perceived rejection from a provider leads to intense feelings of anger
  - It is important to assess the patient's potential for suicidal completion and link the suicidal ideation with other emotional responses rather than to label the patient as "acting out" or "attention seeking" (Marcus, 1996)
- Take all suicidal threats seriously even if you think they are manipulating

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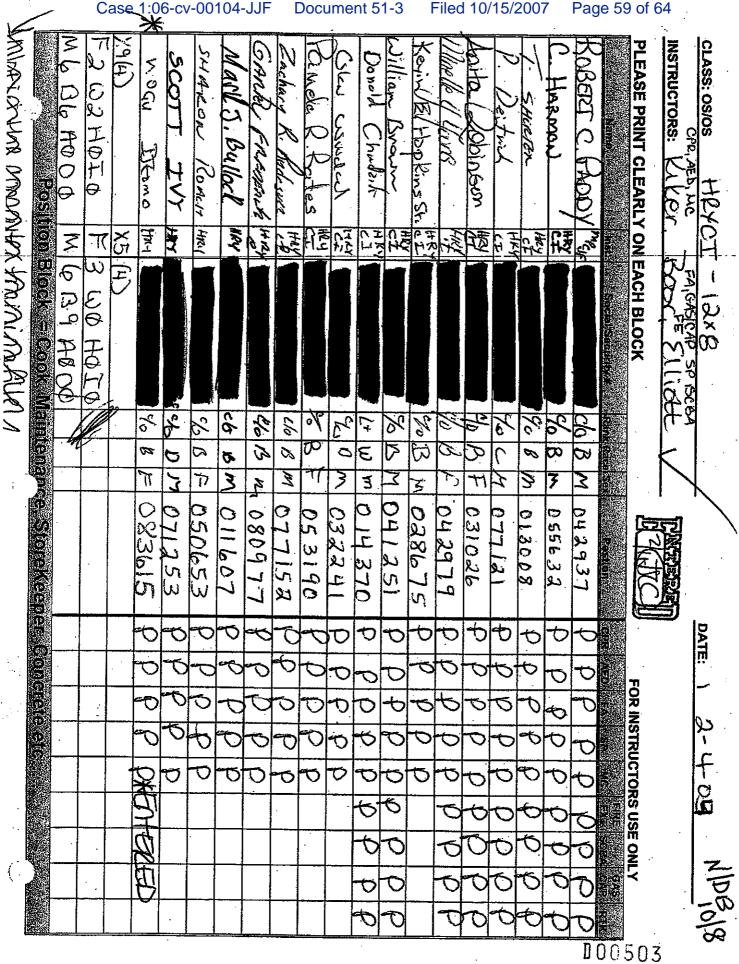
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Case 1:06-cv-00104-JJF

Page 55 of 64

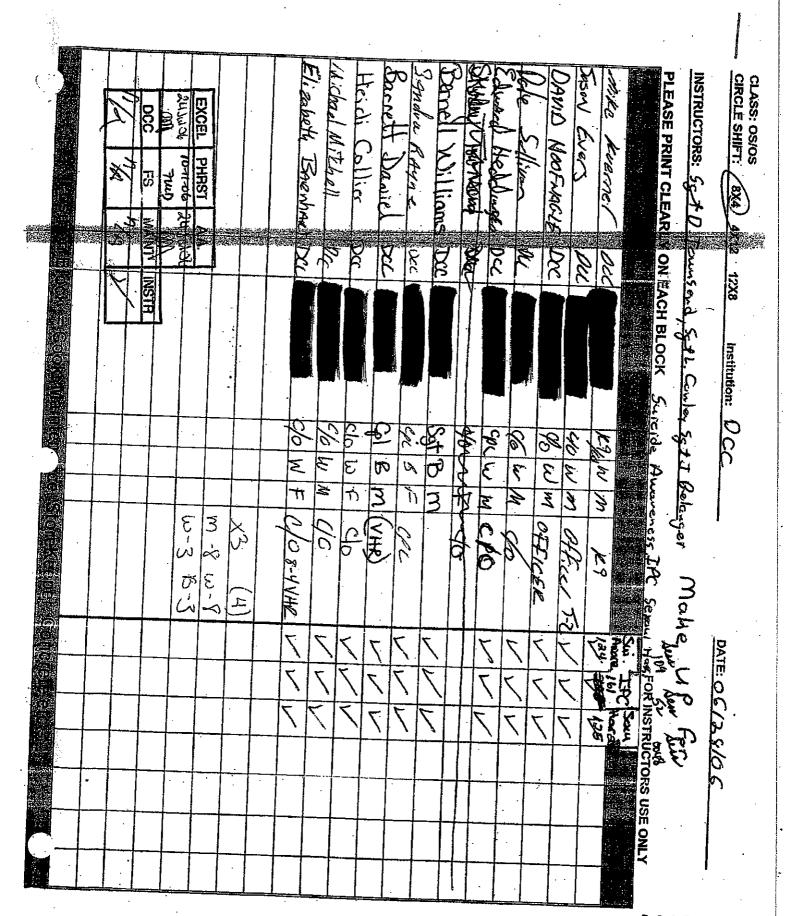
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Poslinon				·	00 0	<del> </del>	A	ナローエー	MLBO MDB	FOWL FI W	X6(4) X5(4)		SAYJOKANLEE	RimpHUS Daviels	Lakia Hins	Abbury L. Wilkins Tet	JAMOR L. JOHNSON	Shawn anthony	3511.552	PLEASE PRINT CLEARLY	INSTRUCTORS: (1) / KOOY	CLASS: OS/OS HYRC	
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Block — Cook Wa				/	00	H P	ADV	HOLL	Maga	TO WOOD	X+(+)								Sagalsaguity #	CLEARLY ON EACH BLOCK	Soney William		
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										004	200	7								(	-		



D00512

Holsters

Handcuffs

Black Boxes

6

8

Crank

Sealed Keys

# **HOWARD R.YOUNG CORRECTIONAL INSTITUTION** SHIFT COMMANDER'S REPORT

SHIFT COMM	ANDE	Capt. Bei	rggrun, Bri	an R	DATE	: 11/13/04	
DAY: Satu	ırday		_ TIME A	SSUMED DUTY	/:	2320hrs	· · · · · · · · · · · · · · · · · · ·
I HAVE BRIEF	FED MY	RELIEF: Y	SS XX	<u>«X</u>	NO:		
RELIEVED BY	7: <u>Ca</u>	pt. Jefferson, Ca	rol				
OFF GOING SI	HIFT CO	OMMANDER:	<u></u>	Ca	pt. Berggn	in Cold	28)
ON COMING S	SHIFT C	OMMANDER:		Ca	pt. Jefferso	on .	
		BEGI	NNING E	QUIPTMENT C	OUNT		
38 Revolvers	2	Shackles	8	Cutter	1	Gas Mask	3
Speed Loaders	3	Travel Chains	9	Capstun	1	S/C Keys	22
38 Rounds	24	Hacksaw	1	.40 S & W	7	Gas Cards	19

.40 Rounds

.40 Magazines

196

14

TBC

Hackett

K9

	Black Boxes	5	Locks	5			OSP	Cilento
١	TELL ATT	1						
	TIME	<u> </u>			OMMENTS			
	2315	Capt. E	Berggrun on du	ty, rec'd 2	22 s/c keys, brie	fing by	y Capt.	Bamford
	2338	(4) Ner	w Commitmen	ts TBC=	1491+1			
) (	2400	Code R	Red					
ĮŸ	0022	Code C	Freen TBC=1	491+1				······································
<b>'</b> [	0036	(20) E-	Crew workers	out to cle	an			
	0142	(1) Nev	v Commitmen	TBC=	492+1			
	0155	(1) Rel	ease Bail Pos	ted TB	C=1491+1			-,
1	0258	Cpl. Ol	iver on duty fo	r the kitcl	nen			
	0312	S/Sgt. I	Leonard on dut	y for the	citchen			
	0340	(1) In F	Iouse transfer	from 1E-1	5 to Inf.198 I/N	I Evan	s place	d on PCO II
	0345	Code R	ed				1	
	0404	Code G	reen TBC=14	<del>1</del> 91+1				
	0500	(4) In H	Iouse transfer:	from floor	to beds			
	0645	Code R	ed					
	0709	Code G	reen TBC=14	191+1			-	
	0710	Capt. B	erggrun on du	y, rec'd 2	2 s/c keys, brief	ing by	Capt.	Bamford
		Je	Ilepson				/	RRYGRUN

11

		36	35	34															20	19	<u></u>	17		15	4	12	;   =			П	
SCHRACK, DONALD	COURTER I WARK	SALINDERS MARK	RODRIGUEZ , ZACHARY	ROBINSON, ANITA	ROACH, SHARON	RICHBURG, STEFAN	POOLE, CHARZELL	PLATT, LISA	PADDY, ROBERT	LEVAN, SEAN	LEGETTE, JOSEPHINE	KETLER, DESHAUN	JOHNSON , JAMIE	IVY, SCOTT	TOTAING, ARVIN	DONALD REPORTS	PARKIO, LAKIA	TARDIO LANGE	HARMON, CORNELIUS	HAGAINS, DERRICK	HACKETT, RICHARD	GRIFFIN, CHARLES	GAYMON, KIMBRIDGE	FREDERICKS, GARRY	DIXON, YVETTE	DEITRICH , PHILLIP	DAVID , JOHN	CILENTO, STEVEN OPS	OFFICERS	Officers	NAME
MO/TU	TUWE		THIED	SU/Mo	su/Mo	TH/FR	FR/SA	TUME	SU/MO	SA/SU	TUWE	TUWE	WE/TH	FR/SA	SA/SU	WETH	THER	MIC/		SUMO	MO/Tu	SA/SU	MO/TU	THIFR	FR/SA	TH/FR	WE/TH	WE/TH		Q.	EXAG
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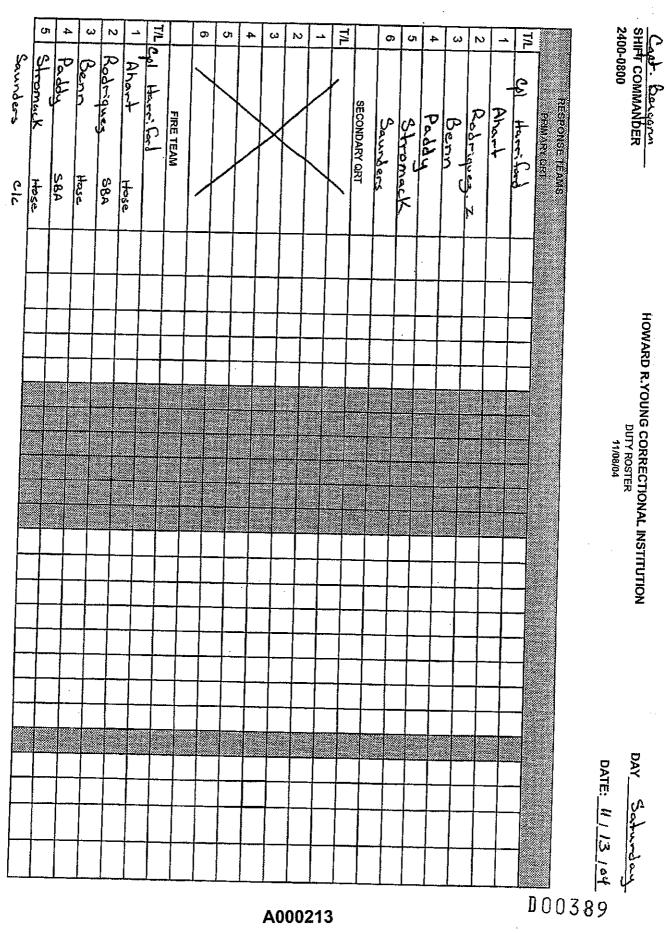
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	A PART OF THE PART								YOUNG , MINELLE	YOUNG DENISHA	YEAGER, KRISTINA	WOODARD,GLEN	45 WILLIAMS, JOSEPH	44 WILKINS, ASBURY	TROY, WILLIAM			SOUL, JAMAR	39 SMITH, DAREN	SHORTER, TERRANCE	
									TH/FR	WЕЛН	TUWE	s <sub>A</sub> /su	SU/MO	FRISA	TUME	TUWE	TH/FR	SA/SU	SA/SU	sumo	DAYS OFF
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HOWARD R.YOUNG CORRECTIONAL INSTITUTION
DUTY ROSTER
11/08/04

ase 1:06-cv-00104-JJF	Document 51-4	Filed 10/15/2007 Page 4 of 47
		SHIFT COMMANDER 2400-0800  NAME  12X8 SHIFT VHRS 11/08/04 TO 11/21/04  1 AHART, AUSTIN 2 WILLIAMS, TONY 3 HACKETT, ROBERT 4 HAMMOND, JAMES 5 LONG, KENNETH 6 GRIFFIN, SHIRELLE
		DAYS T A G A G A G A G A A G A A G A A A A A
		HOWARD R. YOUNG CORRECTIONAL INSTITUTION VHR DUTY ROSTER 10/25/04  1 1 2 2 2 2 2 2 2 2 2 2 2 2 3 4 2 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
		DAY: Saturday  DATE: 11/13/04  2 2 2 0 1 B R  W Y 2 R R R  W R R  R  R  R  R  R  R  R
	A000212	00388



	OVERTIME DUTY ROSTER	HOWARD R. YOUNG CORRECTIONAL INSTITUTION
7		DAY S

20	19	18	17	16	亦	4	교	12	2	6	9	00	7	6	<b>U</b> T	4	ω	2	-		]
The state of the s					Andreas Andrea				Average de la companya de la company					Training and the state of the s				Covelli	Clark	OFFICERS LAST NAME	
																		ひのかっ	Veron	OFFICERS FIRST NAME	HOWARD R. YOUNG CORRECTIONAL INSTITUTION OVERTIME DUTY ROSTER
																				# NSS	VAL INSTITUTION STER
							And the state of t											Cheix	3	OT HOURS POST	DAY Saturday
							<u>t</u> -	!_		\00	021	4							I		00390

ATTACH THIS PAGE TO DUTY ROSTER. SS# IS ONLY NECCESSARY IF OFFICER DOES NOT WORK AT THIS INSTITUTION

OT DUTY ROSTER

Saturday	
12X8 SHOET	_

### BUREAU OF PRISONS OVERTIME REPORT

BUDGET UNIT#	006	BUDGET UNIT NAME	HRYCI
PERIOD WORKED	11/13/04	PAYCYCLE PAID	11 13 04
REASON FOR OVERTINADMINISTRATIVE	ME		TOTALS
AWOL			
CALL BACK			
CLASSIFICATION			
COURT			
COMPASSIONATE LEAVE			
EXTRA DUTY - INSIDE			
EXTRA DUTY - INSIDE EXTRA DUTY - OUTSIDE			
FMLA			
GYM VACANCY			
HEARINGS / INVESTIGATION	O / DICOIDI DI LIDII		
INVENTORY	87 DISCIPLINARY		
JURY DUTY			
LATE RELIEF			
LEAVE WITHOUT PAY			
MAILROOM / SUPPLY			
MEETING / UNION BUSINESS			
MILITARY LEAVE			
OUTSIDE HOSPITAL 2 410'S	•		
REPORTS			طا
SHAKEDOWN			
SICK			<del></del>
SUSPENSION			
TRAINING			<del></del>
TRANSPORTATION			
FUNERAL RUN			<del></del>
INMATE TRANSFER			
MEDICAL RUN			<del></del>
TRAVEL TIME			<del></del>
OTHER			<del></del>
UNAUTHORIZED ABSENCE			
VACANCY		•	
VACATION			
WEAPONS RECLASSIFICATION			
WORKMAN'S COMPENSATION	Ţ		<del></del>
OTHER: FIRE EQUIPTMENT			
OTHER: ESCAPE DRILLS			
OTHER: EXECUTIONS			
OTHER: OUT OF STATE TRANS	SFERS		***************************************
OTHER: RECORDS			<del></del>
OTHER: CODE			<del></del>
OTHER: SPECIAL PROJECTS			
OTHER: CONSTRUTION, VEST	, GRIEVANCES		
OTHER: COMPUTER PROBLEM	IS		
OTHER: WATCH CMDR.			
OTHER:			<del></del>
OTHER:			
TOTAL HOURS REPORTI	<b>ED</b>	•	صا

SATURDAY 92

A000216

## HOWARD R.YOUNG CORRECTIONAL INSTITUTION SHIFT COMMANDER'S REPORT

SHIFT COMM	ANDER:	Capt. Carol	Jefferson	<u> </u>	I	ATE:	11/13/04	
DAY: Satu	rday		TIME AS	SSUMED DU	JTY:		0715 hrs.	
I HAVE BRIEF	ED MY	RELIEF: YES	XXX	<u>x</u> _	Ī	NO: _		
RELIEVED BY	: Cap	t. David Bamford						
OFF GOING SI	HIFT CO	MMANDER:	Capt. C	C. Jefferson	Caph	b).	<del> </del>	
ON COMING S	SHIFT CO	OMMANDER:		DRB.		<i>U</i>		·
		BEGIN	NING EQ	UIPTMEN	T COUN	${f T}$		٠
.38 Revolvers	2	Shackles	8	Cutter			Jas Mask	3

.38 Revolvers	2	Shackles	8	Cutter	1	Gas M	ask	3
Speed Loaders	3	Travel Chains	9	Capstun	1	S/C K	eys	22
.38 Rounds	24	Hacksaw	1	.40 S & W	7	Gas C	ards	20
Holsters	6	Crank	1	.40 Rounds	196	TBC	1491-	-1=1492
Handcuffs	8	Sealed Keys	11	.40 Magazines	14	К9	J. Lee	
Black Boxes	5	Locks	5		*	OSP	Terrel	I

·
COMMENTS
Capt. Jefferson on duty, rec'd 22 s/c keys and briefing from Capt.
Berggrun. Lt. Queener and Lt. Farmer on duty. TBC=1491+1osh=1492
All OSH equipment is accounted for. No areas locked down.
(1) New Commitment TBC=1492+1osh=1493
Code Red TBC=1492+1osh=1493
Code Green TBC=1492+1osh=1493
(1) Release- Time served TBC=1491+1osh=1492
Maint. Bray called in to fix S 10 door and primary control panel,
To repair switch F207.
C/O Rivera training on doors.
Maint. Bray arrives to repair S 10 door and primary control panel.
Code Red TBC=1491+1osh=1492
Code Green TBC=1491+1osh=1492
C/o McReynolds, T. called off sick for the 4x12 shift.
C/o C. Lewis called off sick for the4x12 shift, has RTWF. Will return
11/14/04.
Capt. Bamford on duty, rec'd 22 s/c keys and briefing from Capt.

TIME	COMMENTS
	Jefferson.
1500	Code Red TBC=1491+1osh=1492
1506	C/O S. Miller called off sick for the 4x12 shift.
1527	Code Green TBC=1491+1osh=1492
1321	Code Green TBC-1491: 10811 "1492
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	Case 1:06-cv-00104	1-JJF Document 51-4	Filed 10/15/2007	Page 11 of 47
	HOL, V PINA, J. Adams .D Shorter .T Fountous. R	ROVER:	1ST FLR. ROVER: C/O I 1A/B: C/O I 1E/F: C/O    LT: LT. KI 2 A/F ROVER: C/O G	DATE: 11/13 SHIFT COMMANDER: LT: L. PRIMARY CONTROL: PRIMARY CONTROL:
	HOL, VAC, SICK, MIL, ETC. RESIGNED VAC. VAC.		ROACH. S  ENNEY, A.  ROBRIGUEZ. Z  RYMON. K	DATE: 11 13 64  DATE: 11 13 64  LT: CAPT. BERGGRUN, B PRIMARY CONTROL: C/O YOUNG, M PRIMARY CONTROL: C/O YOUNG, M B&R: C/O BULLOCK, M.  B&R: C/O BULLOCK, M.
		1 KKKK KK	SBA	
	HO	2 J/K: 2 L/M: 2 V/Z ROVER: 2V: 2W: 2Y: 1 DORM 2: GYM:	1C/D: INF: INF: 2 G/M ROVER:	MULTI-PURE  L/W: CPL  B&R:  B&R:
. מין	HOL, VAC, SICK, MIL, ETC.		C/O THORNE, V  C/O THORNE, V  C/O Schrack, D  C/O Schrack, D  C/O Schrack, D  C/O HAGAINS, D	POSE CRIMINAL JUSTIC DAILY ROSTER  DAY: SATURDAY  UNIT 1 & 2  HARRIFORD, W E  CPL. CHAPPEL. D  CICAS AWARES, M.  C/O. BULLLOCK, M.
		HOSE	WAND HOSE ST	EQUIP.
	MISC. INFORI	MISC: C/	DORM 4: C/O  DORM 4: C/O  DORM 5: C/O  DORM 6: C/O  DORM 6: C/O	
	MISC. INFORMATION:  Williams T SIS  Hackett R FIS  Ahart A MIS  Long K MIS	o so F.X	Hamma BROWN.	SHIFT SUPERVISOR:  OPS: C/O CILENTO, S  K-9: C/O Hackell  SEC. CNTRL: C/O CAIN. R
		Vergon) JOHN 2E-4 Roma	W W X 308	SHIFT: 12 X 8
		A000219	¢	D00395

SHIFT COMMANDER

11/08/04	DUTY ROSTER	OUNG CORRECTIONAL I
		NOTTUTION

				10000000   00000000   00000000   00000000		
NAME	DAYS	STAT	≱ + O → M →	P C D D D D D	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	) B R PG
ERGGRIIN BRIAN CAPTAIN	2	\		7		n n
STA	FR/SA	少				
LEN	WЕЛН	×				
HUDZIK, DONALD LIEUTENANT	FR/SA					
ENNEY, AUDREY LIEUTENANT	SU/MO	×				
ARKER, PHILIP VARVAR CAPT.	VAR					
RITCHETT, MICHAEL VARVARLT.	VAR	\				
OUNTAIN, REUBEN K-9		VAC				
EE, JAY K-9	WЕЛН			THESHAY ONLY 2300-0700	HOURS	
K-9 VAR/VAR				<b> </b>		
***						
WIFLE I , JAMES SERGEANT	SA/SU		-			
NAL S						
	FRVSA	`  `	2			
OLO CITATONIO CEL	SU/MO	<b>×</b>	1			
児	TUME	L.	N N			
AM	MO/TU	1	T/1 WT			
CISON, BENNY CPL	THIFR	×	ME MT			
CPL	WE/TH	<u> </u>				
OFFICERS						
DAMS, DEBORAH	SUMO	YAC				
ADAHUR, RAMROOP	FR/SA	\ 				
ATES, PAMELA	FR/SA	\				
ENN , DONALD	US/AS					
OSTON, TAMARA	MO/TU	×	- <sup>2</sup> K			
ROWN, WILLIAM	SU/MO	×	Doen 4			
JLLOCK, MARK	MO/TU		<b>SE</b>			
JRLEY, SONYA	FR/SA		_			
JSH , MATAN	TU∕WE	×	설			
IN PEREVAL	4	┙	- 1		_	

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DATE:11-13-04	Multi-Purpose Daily F	Multi-Purpose Criminal Justice Facility Daily Roster: 8x4 Shift	SATURDAY	$\omega$
Shift Command: CAPT JEFF.	Security Team: C/O CERISIER	× '\		
Shift Supervisor:	Security Team: C/O (CAN) (	01 M		
Operations Lt:		V		
	Security Team:C/O KADOW	V Sickcall (Am)		
Unit 27: C/O TERRELL				
K-9: C/O LEE	<b>/</b>			
Unit 1				
17	L/W B/R: CPL FORTE	VIA/B: C/O JOHNSON, D. T	VIAVB: C/O Scott.	
	_	VICID: C/O. SAVACOE.	Vicio: c/o milliony to	
LM: CPL	C/O.	J. DAVIS	JIE/F: C/O.HARGROVE T	
Lobby: C/O MCGEE, N. √	BIR: C/O EMIG	VIEF: C/O HITCHEUS		
MILLISACH C/O STANDI	B/R:	INF: C/O. R. Hackett OT	VINF: C/O NEWMAN	
P/C BKS: CPL MCMULLIAN √		C/O. W. ROEI	V∫DORM 4.C/O.C. KALONDER	
P/C DRS: C/O.HARRISON ∀		UNIT 12 C/O.POWELL	VVSR 1: C/O BORDLEY	
Unit 2			, -	
LT: FARMER	24/B: C/O BIAMOND T	Wave:cio Blue of	<b>V√VSR 2</b> : C/O. FLAKES	
IMAN SCHRICHARDS TOW	√/2C/D: C/O HIGGINS	VEDECIOZ PaigeTON		
	ZEIF GIO AMAR T	VIZEIF: CIO K BUT EX OT	<b>S</b>	
L/W:	ZGIH: C/O COORER C/C	V/2014: C/O D Powell of	,	
Unit 13:	2J/K: C/O. BROOKS.	Vizing c/o: Homispord 01		
Unit 14: C/O NEWMAN	2L/M: C/O CONRAD	702		
Unit 3				
LT: QUEENER	20: C/O T. BUFF.	√2V: C/O BRELAND	Dorm 1. C/o BALOW.	
S/C: C/O ROY	2R: C/O DANIELS, V.	V2W: C/O AUSTIN	VDorm 2: C/O Gassner	
S/C: CPL GRESMER	2S: C/O SHADE	√2Y: C/O BROWN	V∫Dorm Rover: REDMAN	
LW: SGT. KENNEDY	2T. C/OZ Rodriguez	GN/22: C/O. Barie	V MISC:	
L/W: SGT	Unit 15: C/O Still, D.	<b>∜UNIT 16:</b> C/O	UNIT 25 KINLOCH	
MAN CONTRACTOR OF THE PARTY OF	MISC:	MISC. C/O	MISC: C/O	

E:11-13-04		•
	Daily Roster: 8x4 Shift	Multi-Fulpose Chilling Justice Lacility
SATURDAY		-

		-		
OFFENDER		•		A A A A A A A A A A A A A A A A A A A
	•	SCOTT T/F	Donald Powell	
	<	, MILLIGAN M/T	<	
		NE W/T	Cal Ram, Carilly BANE	GMAN SARS
	<u> </u>	BAROW M/S	Ole Marville Hochell BA	Thompkins S
		FAGAN S/S 1	C/o Zachari Aire & FA	. HI
		LISKIEWICZ F/S	C/n Katoma Bunlay LIS	R. MLWO
	i	GRIFFIN S/S	C/o Tochur, Malininer GR	VAC
7 7 1	VCh Mania Prist	SAVAGE M/S	and i	W/C
L_	160 Comie King	PRITCHETT F/S	C/n Mark Plue PR	유
ROOM#	OUTSIDE HOSPITAL	VHR'S	OVERTIME	VAC/ HOL/MILITARY
SATURDAY				DATE:11-13-04

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MCMILLIAN, KENNETH P/C CORPORAL	PEREZ, RUFFINO CORPORAL	JACKSON, EDWARD CORPORAL	HAMILTON, LARRY LOADING DOCK	RAYNE, SANDRA CORPORAL	MASSEY, TERRIS CORPORAL UR	KERNS, FRANKIE CORPORAL	GOLDSBORO, REGINALD CORPORAL	GRESMER, LILLIAN CORPORAL	CORPORALS	SERGEANT	WAY, FRED SERGEANT	WILSON, WAYNE SERGEANT P/C	RICHARDS, CHARLES SERGEANT	KENNEDY, HOWARD SERGEANT	MOODY, MARY SERGEANT	LEWIS, MICHAEL SERGEANT	RLES	GRANT, JOHN SERGEANT	SERGEANT'S	ALEXANDER, SPENCER K-9	LEE, JAY K-9	BRYANT, JOSEPH K-9	FAHEY, GERALD STAFF LIEUT	PRITCHETT, MICHAEL VAR/VAR LT.	EMIG, MARK CAPTAIN	PARKER, PHILIP VAR/VAR CAPTAIN	LIEUTENANT	SHEETS, PATRICK LIEUTENANT	FARMER, SYLVIA LIEUTENANT	QUEENER, WILLIAM LIEUTENANT	POLK, JOHN STAFF LIEUT	JEFFERSON, CAROL CAPTAIN	NAME
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8X4 SHIFT

### **BUREAU OF PRISONS** OVERTIME REPORT

BUDGET UNIT#	006	BUDGET UNIT NAME	HRYCI
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REASON FOR OVERT	IME		TOTALS
ADMINISTRATIVE			
AWOL			
CALL BACK	•		
CLASSIFICATION COURT			
COMPASSIONATE LEAVE			
EXTRA DUTY - INSIDE			
EXTRA DUTY - OUTSIDE			·
FMLA			
GYM VACANCY			
HEARINGS / INVESTIGATION	NS / DISCIPLINARY		
INVENTORY			
JURY DUTY			<del>*************************************</del>
LATE RELIEF		•	
LEAVE WITHOUT PAY			****
MAILROOM/SUPPLY			· · · · · · · · · · · · · · · · · · ·
MEETING / UNION BUSINE	SS		<u> </u>
MILITARY LEAVE	م. در ایا م		
OUTSIDE HOSPITAL -246	CRUSTAKSP. 2308		76
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SHAKEDOWN			
SICK			
SUSPENSION			· · · · · · · · · · · · · · · · · · ·
TRAINING TRANSPORTATION:			
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WORKMAN'S COMPENSAT	10N-196		<del>. 8</del>
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TOTAL HOURS REPOR	RTED	·	88

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# HOWARD R. YOUNG CORRECTIONAL FACILITY SHIFT COMMANDER'S REPORT

SHIFT COMM	ANDE	R:	Capt. F	Bamford		DATE:	11/	13/04
DAY:	S	aturday	TI	ME ASSUMEI	DUTY:		1520	j
HAVE BRIE	PED M	Y RELIEF:	YES: X	XX_		NO:		_
RELIEVED BY	7: <u> </u>		Slt. Lee	<b>)</b>				
OFF GOING S	HIFT C	OMMANDER	·	·	Capt.	Bamfore	11	
ON COMING	SHIFT (	COMMANDER	રઃ		Slt	. Lee 🛭	2	
		BEGI	NNING EQ	UIPMENT C	OUNT			
38 Revolvers	0	Shackles	8	Cutter	1	Gas	Mask	3
peed Loaders	1	Travel Chains	9	Capstun	1	S/C	Keys	22

.38 Revolvers	0	Shackles	8	Cutter	1	Gas Mask		3
Speed Loaders	1	Travel Chains	9	Capstun	1	S/C Keys		22
.38 Rounds	12	Hacksaw	1	.40 S & W	6	Gas Cards		19+1
Holsters	5	Crank	1	.40 Rounds	168	TBC	149	
Handcuffs	8	Sealed Keys	11	.40 Magazines	12	K9	Lor	
Blackboxes	5	Locks	5			OPS	McCr	

	TIME	COMMENTS
	1450	Capt. Bamford arrives for duty.
	1520	Relieve 8x4 after briefing and receipt of shift keys.
	1600	Code Red.
İ	1624	Code Green. TBC=1491+1
	1922	1 (one) commitment. TBC=1492+1
	2000	Code Red.
	2012	Code Green. TBC=1492+1
ļ	2046	1 (one) commitment. TBC=1493+1
	2132	1 (one) commitment. TBC=1494+1
	2247	1 (one) commitment. TBC=1495+1
ľ	2300	Code Red.
1	2309	Code Green. TBC=1495+1
	2310	4x12 relieved by 12x8 after briefing and exchange of shift keys.
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7/01 1/15/

A000232

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DAILY ROSTER: 4X12 SHIFT	HOWARD R. YOUNG CORRECTIONAL FA
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DAIE: 11/13/04	04			A STATE OF THE STA	SAIORDAI
VHR RELIEF	TH.		VAC/SICK/MILITARY	OUTSIDE HOSPITAL	ROOM#
MINNITI, V.	M/S	0	CURTIS, S. S/S MLWOP		
KLINE, J.	F/S		ROWE, J. TAV MLWOP		
CARMONA, J.	M/T		NEAL, D. W/T MLWOP		
SEARLES, W.	F/S		CAMPBELL, E. S/S MLWOP		
BAYNE, E.	M/S		CUSTER, E. M/T W/C	1	
JOHNSON, P.	T/F		SCHAFFER, T. M/T W/C		
ROGERS, R.	WAT		MEDFORD, J. F/S VAC		
			VARGAS, R. S/M		
		***************************************	ROMANOWSKI, T. T/F SICK		
	<del></del>		WILLIAMS, G. VAC	,	
			RDO(	ALL MEDICAL RUNS	OFFENDER
			P	1	
			Miller, S. ABS. +		
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			Lewis, C. Abs.		÷
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	STEVENS, JAMES S/T	SESSOMS, SONIA	WALL, DAVID	WILLIAMS, GARLAND	VARGAS, RAMON	EDWARDS, JUNE	CORPORALS					KIKER, MARY	LAWRENCE , PHILLIP	DEFEO, GREGORY	ROWE, JOHN	FRENCH, STEPHEN	MEDFORD, JOSEPH	SERGEANT'S	K-6	LEE, JAY K-9	LORAH, PETE K-9	PRITCHETT, MICHAEL VARVAR LT	PARKER, PHILIP VARVAR CAPT.		LT.	RYDER, ROBERT LT.	DYCH, WALTER LT.	SENATO, KEVIN LT.	SABATO, JOSEPH STAFF LT	BAMFORD, DAVID CAPTAIN	NAME
FR/SA	FR/SA	THIFR	мо/ти	WE/TH	SUMO	SA/SU		HLEZIM	WE/TH	SU/MO	SUMO	MO/TU	MO/TU	TH/FR	TUME	SA/SU	FR/SA		VHR	WЕЛН	SUMO		VAR		TUME	WE/TH	FR/SA	SUMO	FRVSA	SUMO	DAYS
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HOWARD R. YOUNG CORRECTIONAL INSTITUTION
DUTY ROSTER
11/08/04

SHIFT COMMANDER
1600-2400

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34 LAMBERT, ROBERT	33 JORDAN, LEWIS	32 JONES-NDIAYE, LOLITA	31 JOHNSON, KELLI	30 JOHNSON, HARRY	29 JOHNSON, DAVID	28 JOHNSON, COREY	27 INCE, GARY	26 HOOKS, DESIREE	25 HAMBRIGHT, JESSE	24 HACKETT DWIGHT	23 GALLI, BRIAN		21 FARRINGTON, GREGORY S/T	20 FABRES, EDUARDO	19 EVANS, LARRY	18 DUGGINS, HORACE	17 DIAL, WAYNE	16 DENNY, RAHIM		14 DANIELLO, ANGELO S/T	13 CUSTER, ELLYN	馬		10 CLARK, VERON	9 CHUKUNNEYE, NNABUGWE	8 CARLOCK, DONALD	7 CANNON, MARK	6 CAMPBELL, EWONNU	5 BURLEY, KATRINA		3 BLUE, MARK	2 BAKER, SIDNEY	1 APA, BRADFORD	OFFICERS	NAME	SHIFT COMMANDER  1600-2400	10 gertouch
WETH	SA/SU	THIFR	WE/TH	TUME	FR/SA	SA/SU	TUME	FR/SA	THIFR	TH/FR	TH/FR	FR/SA	TUME	MO/TU	MO/TU	FR/SA	TH/FR	TUME	FR/SA	ME/TH	MD/TU	TŲ∕WE	SA/SU	WE/TH	US/AS	FR/SA	METH	SA/SU	FR/SA	TUWE	su/Mo	моли	FR/SA		DAY OFF		
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		WOLOSZYN, CHARLES	WILLIAMS, VINCENT	WARREN, REGGIE	WARMKESSEL, EDITH	WARE, LEA	SOTO, FELIPE	SMITH , BERNARD	SCHAFFER, TAMIKO	ROMANOWSKI, THOMAS		RIVERA, EDWARD		PYLE, GEORGE	PRESSLEY, CHARLES			PLEASANTON, ANTHONY	PAIGE, ZACHARY	48 NEAL, LOUIS	NEAL, DOUGLAS		MOORE, JAMES	MITCHELL, JOHNNY	MILLER, STACEY	MEEKS, JAMES		MCCREARY, MEGAN	MCCREARY, JASON	MAYS, REGINALD		MATTHEWS, KENNETH	LEWIS, CARMELLA	NAME
THANE	MO/TU	WETH	TH/FR	TUWE	∃WUT	su/Mo	SA/SU	FR/SA	MO/TU	TH/FR	MO/TU	SU/MO	SU/MO	SA/SU	WESTH	SU/MO	SA/SU	FR/SA	SU/MO	SA/SU	WЕ/TH	MO/TU	SUMO	SU/MO	MO/TU	SA/SU	TUME	FR/SA	TH/FR	SA/SU	МО/ТИ	MO/TU	WЕЛН	OFF
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HOWARD R. YOUNG CORRECTIONAL INSTITUTION
DUTY ROSTER
11/08/04

SHIFT COMMANDER

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A000236

D00412

Page 29 of 47 Case 1:06-cv-00104-JJF Document 51-4 Filed 10/15/2007 69 71 72 73 SHIFT COMMANDER
1600-2400 POWELL, DONALD NAME WE/TH TH/FR SU/MO WE/TH MO/TU PAY OF SA/SU -1 >• -1 α **Ø >** → and ರಣ∸ ग ।ग ∽ ற அல

HOWARD R. YOUNG CORRECTIONAL INSTITUTION
DUTY ROSTER
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								-					3	Reaces R	2	16	Scharts Was	(Arrowa, J	Kline 5,	Hampaite 11	6 GRIPFIN, SHIRELLE	5 LONG, KENNETH	4 HAMMOND JAMES		2 WILLIAMS, TONY	1 AHART, AUSTIN		12X8 SHIFT VHRS 11/08/04 TO 11/21/04	NAME	SHIFT COMMANDER 2400-0800 4 6 1C
			-											3	シン	- 2,4 V	77.	SA (	125	1 K S									DAYS	7
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Flo V. WILLIAMS 11 16	
SECONDARY ORUGINATIONS	Damage Equipment
0/2 A. DANZELLO "3/5	
C/2 DI C	
COZIPATGE ZERIE	
CAP CAMBORI 2C+D	
CARMONA /C+D	

C/O Name	Bag#	Helmet	Pads	Vest#	4	Commence
WAR	9-7	)	1	3x-3	1600 N	
DC 1003	M-6	1		×-1		
HANGETONE	- F		1	-XX- (	×	KRS KO
MOOKE	2-6		)	2×-3	,	
WILLIAMS.	2-3	1	1	2x-4	ļ	
DANTELLO	n-5		)	28-5		
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PAIGE	r1-2	\		1-1	•	
LAMBERT	X4-3		-	3x-1		
CARDON A	2-5	1	~. <b>)</b> ~	3x · /		•
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Inventory

D00416

ATTACH THIS PAGE TO DUTY ROSTER. SS# IS ONLY NECCESSARY IF OFFICER DOES NOT WORK AT THIS INSTITUTION

OVERTIME DUTY ROSTER	HOWARD R. YOUNG CORRECTIONAL INSTITUTION
	DAY SAT

	OFFICERS LAST NAME	OFFICERS FIRST NAME	# NSS	
۲ ا	NAWBIAN	BARRY		
2	Corcene	[has:		
ယ	Johnson	David		THE PARTY OF THE P
4	Shade	Je15e		
5	Fra	Brund		
G	Busley	KATTINA		
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19	TAN-PENNENDAN AND THE PENNENDAN	· · · · ·		
20				

4x12 SHIFT

#### **BUREAU OF PRISONS** OVERTIME REPORT

BUDGET UNIT#	006	BUDGET UNIT NAME	MPCJF
PERIOD WORKED	44 (40 (0 4	DAMONOT P DATO	
TERIOD WORKED	11/13/04	PAYCYCLE PAID	<del></del>
REASON FOR OVERTI	MIE.		TOTALS
ADMINISTRATIVE	.7115		TOTALS
AWOL			
CALL BACK	<del> </del>		
CLASSIFICATION			
COURT	<del></del>		
COMPASSIONATE LEAVE			
EXTRA DUTY - INSIDE			
EXTRA DUTY - OUTSIDE			
FMLA			
GYM VACANCY			
HEARINGS / INVESTIGATION	NS / DISCIPLINARY		<del>-  </del>
INVENTORY	C. Disour Militi		<del></del>
JURY DUTY	B-11	······································	
LATE RELIEF			
LEAVE WITHOUT PAY		<del> </del>	
MAILROOM / SUPPLY			
MEETING / UNION BUSINESS	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
MILITARY LEAVE	-		
OUTSIDE HOSPITAL			16
REPORTS			
SHAKEDOWN	<del></del>		-
SICK			
SUSPENSION	·		
TRAINING			
TRANSPORTATION:		· · · · · · · · · · · · · · · · · · ·	
FUNERAL RUN			
<ul> <li>INMATE TRANSFE</li> </ul>	R		
MEDICAL RUN			
TRAVEL TIME			
OTHER			
UNAUTHORIZED ABSENCE			
VACANCY	<del></del>		48
VACATION			- <i>LD</i>
WEAPONS RECERTIFICATIO	N		
WORKMAN'S COMPENSATION			
OTHER: FIRE EQUIPMENT			
OTHER: ESCAPE DRILLS			
OTHER: EXECUTIONS			
OTHER: OUT OF STATE TRA	NSFERS		
OTHER: RECORDS	- 10- 210		
OTHER: CODE			
OTHER: SPECIAL PROJECTS			
OTHER: COMPUTER PROBLE			
OTHER: RESIGNATION		· · · · · · · · · · · · · · · · · · ·	
OTHER: WATCH CMDR.			
OTHER:			
OTHER:			
TOTAL HOURS REPOR	TED		64
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A000243

### HOWARD R.YOUNG CORRECTIONAL INSTITUTION SHIFT COMMANDER'S REPORT

SHIFT COMM	ANDER	: 	S	taff Lieute	enant Lee	_ DATE	3:	11-14-0	)4
DAY:	Su	nday	<del></del>	TIME AS	SUMED DUTY:			2310	
I HAVE BRIE	FED MY	RELIEF;	YES	XXX	<u>.                                   </u>	NO:			
RELIEVED BY	Y:		Staff I	Lieutenan	t Polk	<del>.</del>			
OFF GOING S	HIFT CO	OMMAND	ER:	·	Staff L	ieutenar	ıt Lee	<u> </u>	; <b>₹</b>
ON COMING :	SHIFT C	OMMANI	DER:		Staff Li	eutenan	t Polk	5/19/	
		I	BEGINI	NING EQ	UIPTMENT CO	UNT			
.38 Revolvers	2	Shackles		8	Cutter	1	Gas M	ask	3
Speed Loaders	3	Travel Cl	nains	9	Capstun	1	S/C K	eys	22
.38 Rounds	24	Hacksaw		1	.40 S & W	7	Gas C	ards	16
Holsters	6	Crank		1	.40 Rounds	196	TBC	14	95+1
Transfer 66	1 0	Carled IV		11	40 3 (	1.4	170	E	-1-

TIME	COMMENTS	
2310	S/Lt. Lee and Lts. Chudzik and Pedrick in area for duty. S	S/Lt. Lee
1 1////	relieves Capt. Bamford after briefing	TBC=1495+1
2315	(1) New Commitment (4X12)	TBC=1496+1
2400	Code Red	
0005	Cpl. Covelli & C/O Hagains, D. (2308 Christiana Hosp.)	
/////	(1) 38 caliber, (6) rounds, (1) speed loader.	
0021	Code Green	TBC=1496+1
0048	(24) E-crew workers out.	
0125	(1) New Commitment	TBC=1497+1
0150	(1) New Commitment	TBC=1498+1
0235	C/O Roemer, W. called out for 8X4 shift with the flu.	
0240	(1) New Commitment	TBC=1499+1
0321	(1) In house transfer, floor to bed.	
0345	Code Red	
0406	Code Green	TBC=1499+1
0410	FSS III Leonard & FSS I Oliver in area for duty.	
0514	C/O Buff, T. called out for 8X4 shift with the flu.	

**Black Boxes** 

Cilento

TIME	COMMENTS	
0645	Code Red	
0705	Code Green	TBC=1499+1
BRIEFING:	2H pod outer hallway and interview room doors not o	perating from the
/////	panel. Maintenance unable to fix till Monday. Also ac	ivised of light out
/////	outside Primary Control. Will look at on Monday.	
0715	S/Lt. Lee relieved by S/Lt. Polk after briefing.	TBC=1499+1
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	Case	1:06	-cv-C	0104-J	JF	Do	cum	ent	51-	4	Filed	10/15/	20	07	Pag	ge (	38 of	47		
	PLANT, L.	Gayman, K	BATES. P		GYM:	2T:	2R:	2Q:	2 Q/T ROVER:	2 C/D:	2 A/B:	LT:	1E/F:	1A/B:		PRIMARY CONTROL:	PRIMARY CONTROL:	SHIFT COMMA	DATE:	d.
	7सम्बद्ध छाउ रहाराज्यहरू	S-ABS	RESIGNED	HOL, VAC, SICK, MIL, ETC.	O C F T T T T T T T T T T T T T T T T T T	C/O HARRIS I	C/O Homman	C/O YEAGER. K	C/O HACKETT, R	C/O STROMACK.'S	C/O RODRIGUEZ Z	LT. PEDRICK. A	C/O HARMON. C	18) FLK ROVEK: C/O TROY, W HOSE 1A/B: C/O FREDRICKS, G		TROL: CPL. DOTSON, B.	LT. D. CHUDZIK TROL: C/O SAUNDERS. M	SHIFT COMMANDER: S/LT. LEE, W		
	BUCE	r   6	4	ED		Suttle of	one /	, ,	SBA •		SBA V		7		`	/			\	
		,			GYM:	DOBM 2	2W:	2V:	2 V/Z ROVI	2 J/K: 2 L/M:	2 G/M ROV	L/W: CP	NF:	1C/D:	B&R:	B&R:	LW: B&R:			
3E 7				HOL, VAC, SICK, MIL, ETC.	ON DEFENDING F.	C/O YOUNG, M S/r	C/O LEGETTE. J	1 : 1	ER: C/O POO! F C	C/O WILKINS. A .	2 G/M ROVER: C/O BAHADUR. R		C/O SCHRACK, D	CIO NICHAUE Lalina	C/O BULLOCK, M.	YOUNG. D	CPL. CHAPPEL. D	UNIT 1 & 2	DAY: SUNDAY	PAILY ROSTER
						Hopus V	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		HOSE •	1	HOSE.	EQUIP.		7.4.0 x		C/C /	WAND /			JE FACILITY
		Hammond		MISC. INFORMATION	DOWN I GENOVEN	DOBM 4 &	•	HAGANS, DURNICK	2308 04	MISC:	C/O:	FITNESS CENTER:	DORM 4:	DORM 4:	SEC. CNTR		OPS:	SHIFT SUPERVISOR:		
		T WIT	75	DRMATION	ENGALM. O'O VEITER' D			DENTICE.	2308 CHEISTIANA HOSP.			ENTER:	C/O RICHBURG. S	C/O: Was Nucleus, Vlascour	SEC. CNIRL: C/O JOHNSON. J		C/O CILENTO, S C/O FOUNTAIN, R	ERVISOR:	SHIFT:	   
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DAILY ROSTER: 4X12 SHIFT	HOWARD R. YOUNG CORRECTIONAL II
OSTER: 4X12 SHIFT	GORRECTIONAL INSTITUTION

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OFFENDER	MEDICAL RUNS	The state of the s			
		ROMANOWSKI, T. T/F SICK	-		<u> </u>
		PRESSLEY, C. VAC/ML			
	-	VARGAS, R. S/M VAC			
		MEDFORD, J. F/S VAC	The second secon	ROGERS, R. T/W	ROG
		SCHAFFER, T. M/T W/C		JOHNSON, P. T/F	된
		CUSTER, E. M/T W/C		BAYNE, E. M/S	BAY!
		CAMPBELL, E. S/S MLWOP		SEARLES, W. F/S	SEA
		NEAL, D. W/T MLWOP		CARMONA, J. M/T	CAR
-	MCGEE NAAMAIA	ROWE, J. TAW MLWOP		KLINE, J. F/S	Ž
	BUTCHER BAABAR.	CURTIS, S. S/S MLWOP		MINNITI, V. M/S	Z N
ROOM#	OUTSIDE HOSPITAL	VAC/SICK/MILITARY		VHR RELIEF	
SUNDAY				DATE: 11/14/04	D

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CAIN, REBEKAH	BUSH, MATIN	BURLEY, SONYA	BULLOCK, MARK	BROWN, WILLIAM	DOSTON, LAWARA	BOSTON TANKS	BENN, DONALD	BATES, PAMELA	BADAHUR, RAMROOP	ADAMS, DEBORAH	OFFICERS	CPL	DOTSON, BENNY CPL	AM	剪	- GYLEY, PATMICNE		NATE OF	CONTROL OF THE PARTY OF THE PAR	TRIPLETT IAMES SEDSEANT	SERGEANTS	K-9 VAR/		FOUNTAIN, REUBEN K-9	PRITCHETT, MICHAEL VARVAR LT.	PARKER, PHILIP VARWAR CART.		RENNEY, AUDREY LIEUTENANT			LEE, WAYNE STAFF LT.	NEVE	S III	NINAAT
TUME!	TUMVE	FR/SA	MO/TU	SUMO	MO/Tu	0.00	_		FR/SA	SUMO		WETH	THE	MO/TU	TUME	SUMO	FR/SA		USAG	200			WE/TH	TUWE	VAR	VAR		SUMO	FR/SA	WEJTH	FR/SA	SU/MO	OFF	 Days
TO ALL	X	X	X		X	1		TOME CH	X			1	X	X		1	X	1	1	1	1	1		X					X	X	X	1	ΓΑ FB	
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HOWARD R.YOUNG CORRECTIONAL INSTITUTION
DUTY ROSTER
11/08/04

SHIFT COMMANDER 2400-0800

DAY SUNDAY

SHIFT COMMANDER 2400-0800

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SHIFT COMMANDER

HOWARD R.YOUNG CORRECTIONAL INSTITUTION
DUTY ROSTER
11/08/04

Case											6 GRIFFIN, SHIRELLE	LONG, KENNETH	HAMMOND, JAMES	HACKETT, ROBERT	WILLIAMS, TONY	AHART, AUSTIN	Ц.	12X8 SHIFT VHRS 11/08/04 TO 11/21/04	NAME DAYS OFF	3/17- Les SHIFT COMMANDER 2400-0800
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ATTACH THIS PAGE TO DUTY ROSTER. SS# IS ONLY NECCESSARY IF OFFICER DOES NOT WORK AT THIS INSTITUTION

OT DUTY ROSTER

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D00429

DATE: 11/14/04

HOWARD R. YOUNG CORRECTIONAL INSTITUTION OVERTIME DUTY ROSTER

12X8 SHIFT

# BUREAU OF PRISONS OVERTIME REPORT

BUDGET UNIT#	006	BUDGET UNIT NAME	HRYCI
PERIOD WORKED		PAYCYCLE PAID	
REASON FOR OVERTIMADMINISTRATIVE	TE		TOTALS
CALL BACK			
CLASSIFICATION		•	
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EXTRA DUTY – OUTSIDE			
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UNAUTHORIZED ABSENCE		•	
VACANCY VACATION	3@ @kars		24
WEAPONS RECLASSIFICATION WORKMAN'S COMPENSATION			
OTHER: FIRE EQUIPTMENT			
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OTHER: RECORDS	CKO		
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FOTAL HOURS REPORTED	D		(/^
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	Case 1	:06-cv-0	0104-JJF	Do	cum	ent 51	-4	Fi	led	10/	15/2	200	7	Pa	ge 4	47 of	47		
	REVIEWED BY: (MMC)	PREPARED BY:					COMMENTS:	TOTAL	K-9 OFFICERS	OFFICERS	CORPORALS	SERGEANTS	LIEUTENANTS	STAFF LIEUTENANT	CAPTAIN	TITLE	THE NUMBER OF PERSONNEL ON DUTY THIS SHIFT WAS AS FOLLOWS:		
SECORITY		SHIFT COMMANDER (TITLE AND SIGNATURE)					Out-in times a	43	<u>.</u>	34	ហ	0	2	<b>-</b>	0	NUMBER SCHEDULED	ONNEL ON DUTY		
SUPERINTENDENT (SIGN AND DATE	William	DER (TITLE AND S					لار (۱	38	-	36	<u> </u>	0	۲		o	NUMBER PRESENT	THIS SHIFT WAS		
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Page 1							(b) VACAUCIES									HOL		VTINUATION 2400-0800	
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DEPUTY WARDEN (SIGN AND DATE)								4-VACANICS		3-Vacauties	1~VACAWU					OTHER		DATE (C. X. av. 43)	
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# HOWARD R.YOUNG CORRECTIONAL INSTITUTION SHIFT COMMANDER'S REPORT

SHIFT COMM	ANDER		S/LT POL	K, J.	_ DATI	3:	11-14-	04
DAY:	SUND	AY	TIME AS	SUMED DUTY:		07	20HRS	
I HAVE BRIE	FED MY	RELIEF: YES	<u>XX</u>		NO:			
RELIEVED BY	₹: <u></u>	S/LT SABA	то					
OFF GOING S	HIFT CC	MMANDER;	<del></del>	S/L'	ΓPOLK,	, J.		
ON COMING	SHIFT C	OMMANDER:	51	to let				
		BEGIN	NING EQ	UIPTMENT CO	UNT			
.38 Revolvers	2	Shackles	8	Cutter	1	Gas M	ask	3
Speed Loaders	3	Travel Chains	9	Capstun	1	S/C K	eys	22
.38 Rounds	24	Hacksaw	1	.40 S & W	6	Gas C		19
Holsters	6	Crank	1	.40 Rounds	168	TBC	14	99+1
Handcuffs	8	Sealed Keys	11	.40 Magazines	12	K9	BRYA	NT
Black Boxes	5	Locks	5			OSP	KADC	W

	TIME	COMMENTS
Į	0715	S/LT POLK RELIEVED S/LT LEE AFTER BRIEFING. NOTIFIED
		OF THE ALCOVE DOOR ON 2H-POD THAT WAS BROKEN
		AND MAINTENANCE WAS NOTIFIED. TWO CALL OFFS WERE
		RECORDED, C/O ROEMER, W. & C/O BUFF, T. LT FARMER IS
, [		ON DUTY.
\ \	0730	HELD MUSTER, ALL PERSONNELL REPORTED FOR DUTY
101		WITH EXCEPTIONS NOTED ON DUTY ROSTER, ALL AREAS
] ]	(	ARE MANNED, WITH NO LOCKDOWNS OR CANCELLATIONS.
	0800	CODE RED
	0816	CODE GREEN TBC-1499+1
	1117	ONE NEW COMMITMENT TBC-1500+1
	1135	CODE RED
	1140	CODE 7 B/R
		I/M BARKES, C. #361999 HUNG HIS SELF IN CELL #122, CPR
		IS ADMINISTERED BY MEDICAL, UNRESPONSIVE AT THIS
		TIME.
	1141	DEPUTY WARDEN PHELPS IS PAGED

Case 1:0	06-cv-00104-JJF Document 51-5 Filed 10/15/2007 Page 2 of 41
TIME	COMMENTS
1142	DEPUTY WARDEN PHELPS RETURNS PAGE, AND IS NOTIFIED
	OF THE CODE 7 IN B/R, AND 911 WAS CALLED ALONG WITH
	WITH THE STATE POLICE.
1152	AMBULANCE AND THE FIRE DEPARTMENT ARRIVE IN THE
	INSTITUTION.
1155	CODE GREEN TBC-1500+1
	MAJOR WILLIAMS WAS NOTIFIED OF THE INCIDENT IN B/R.
1200	STATE POLICE ARRIVE IN THE FACILITY.
1207	CODE 7 10-1, ALL AREAS WERE LOCKED DOWN, PENDING
	EMERGENCY CLARIFICATION.
1221	AMBULANCE DEPARTS FACILITY, C/O CUMBERBATCH &
	C/O YOUNG, R. DEPART WITH THE AMBULANCE.
1255	LOCKDOWN WAS LIFTED, FACILITY IS OPERATING AT
	NORMAL.
1300	DEPUTY WARDEN ARRIVES IN THE FACILITY.
1306	STATE POLICE CRIME SCENE INVESTIGATION UNIT ENTERS
	THE FACILITY
1345	NOTIFIED BY C/O CUMBERBATCH AT CHRISTIANA THAT
	I/M BARKES, CHRISTOPHER #361999 HAS PASSED.
1355	CODE 8 2YPOD
1359	CODE 8 2YPOD IS 10-1, I/M DOWNS, D #452968 AND I/M HAR-
· · · · · · · · · · · · · · · · · · ·	GROW, R. # 440862 WERE TAKEN TO 1EPOD PENDING A
	DISCPLINARY HEARING.
1444	THREE NEW COMMITMENTS TBC-1503+1
1451	ONE RELEASE (BAIL) TBC-1502+1
1500	CODE RED
1515	CODE GREEN TBC-1502+1
1520	S/LT SABATO RELIEVED S/LT POLK AFTER BRIEFING.
	·
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LW: SGI.	I MI COT	A A LEGIC WINNERS WITH	L/W: SGT	S/C: CPL.JACKSON Y	S/C: C/O ROY	LT:	Unit 3	Unit 14: C/O Bimberb bfeh V	Unit 13: C/O R. YOUNG	L/W:CPL	TO A SECRETARING OF THE PARTY O	LW A-F:	Lt: FARMER	Unit 2	P/C DRS: C/O KINLOCH /	PIC BKS: CIC KAWIEY,	Unit 11: C/O C. BURRELL.	LOBBY: C/O DEMBY	LIW: SGT. F. WAY	LOXES A	LT:	Unit 1	K-9: C/O BRYANT	Unit 27: C/O KADOW		Operations Lt:	Shift Supervisor:	Shift Command: S/LT Polk	DATE:11-14-04	
MISC		UNIT 15: C/O STILL	ZT: C/O HITCHENS	2S: C/O SHADE	2R: C/O HIGGINS	2Q: C/O BROOKS		HELY VIZIJM: CIO EVERETTE ST DANIELS	ZUM: CIG CONBAD: CC + V	2G/H: C/O COOPER		TO CARRON OF SOME	ZAUBI CHO MINAR		-		BVR:	B/R: C/O D. FIELDS V	B/R: C/O MARTELLI	B/R: C/O	L/W B/R: CPL RAYNE				Security Team:C/O CERISIER /	Security Team: C/O TUPALS 01/ Y	Security Team: C/O TERRELL	Security Team: CPL B. TAYLOR U	Daily Roste	Multi-Purpose Criminal Justice Facili
MISC		MUNIT 16: Butcher B.	122. C/O NEAR OF V	2X: C/O BROWN	ン2W: C/O Diamond V	2V: C/O POWELL V		DAMIELS 200 CONDETT O'TX	2JIK: CIO SEARLES O.T. X	DON CO STEVENS, J. O.T. X	VZEIF: CIO. YOUNG DOTX	2010 CO CHNINDALM OF	PANB. CIO. STESOMS: OF Y		Unit 12:0/0 // // // // // // // // // // // //	DORM 4: ATTINITION OF	アチで	1E/F: C/O J. DAVIS.	COO, EMIG	CID CO MCREYNOLDS V	VIAIBY RIVERA								Daily Roster; 8x4 Shift	ninal Justice Facility
MISC: CO	100. C/O	UNIT 25: C/O REDMAN	MISC:	Dorm Rover BANE	Dørm 2: C/O HA	100m 1: C/O. 15 KIEWICS							VSR 2: C/O.HARRISON, R		WSR 1: C/O N. BORDLEY.	DORM 4: C/O.KALONDER.	TNF: C/O. S. HARGROVE.	The same of the sa	1EIF: C/O CHARLES	TGID: CIO Scott	The co Milliamy								SUNDAY	J
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		SA/SU -	6 HAMILTON, LARRY LOADING DOCK	<i>-</i> 1
	Sattle Action of the Control of the	FRVSA	5 RAYNE, SANDRA CORPORAL	.0
		SA/SU -	4 MASSEY, TERRIS CORPORAL L/R	0-0
		SA/SU -	3 KERNS, FRANKIE CORPORAL	UV-
		SA/SU -	2 GOLDSBORO, REGINALD CORPORAL	-00
		SU/MO -	1 GRESMER, LILLIAN CORPORAL	, , (
			CORPORALS	J <b>-</b>
		SA/SU -	9 SERGEANT	-00
		WE/TH	8 WAY, FRED SERGEANT	,,
		SA/SU -	7 WILSON, WAYNE SERGEANT P/C	
		WE/TH \	6 RICHARDS, CHARLES SERGEANT	D(
		THIFR	5 KENNEDY, HOWARD SERGEANT	
		SAISU	4 MOODY, MARY SERGEANT	un
		FRISA	3 LEWIS, MICHAEL SERGEANT	iCi
		SU/MO -	2 GREENE, CHARLES SERGEANT	π,
		SA/SU	1 GRANT, JOHN SERGEANT	J 1
			SERGEANT'S	-0
		SA/SU -	7 ALEXANDER, SPENCER K-9	
	ERIDAY AND SATURDAY DINEY 0700-1500	WE/TH	6 LEE, JAY K-9	
		FRVSA	5 BRYANT, JOSEPH K-9	IIE
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	TOP TO THE PROPERTY OF THE PRO	VAR TRAUS	3 PRITCHETT, MICHAEL VAR/VAR LT.	10
		SA/SU -	2 EMIG, MARK CAPTAIN	,, 1
		VAR -	1 PARKER, PHILIP VARIVAR CAPTAIN	3/2
		WE/IH -	6 LIEUTENANT	.00
		FRISA	5 SHEETS, PATRICK LIEUTENANT	,,
	CALL THIS IS A WARRENT THE TANKS	TUME	4 FARMER, SYLVIA LIEUTENANT	
		SUMO -	3 QUEENER, WILLIAM LIEUTENANT	1 6
	- CANAMAGES	FRUSA	2 POLK, JOHN STAFF LIEUT	ıgı
		SUMO	1 JEFFERSON, CAROL CAPTAIN	_
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HOWARD R. YOUNG CORRECTIONAL INSTITUTION
DUTY ROSTER
11/08/04
REVISED

11 FORTE, BRIAN CORPORAL 12 TAYLOR, BANKY CORPORAL 13 CORPORAL 14 CORPORAL 57 CORPORAL 58 BRINKLEY, WARREN MEDICAL RUN OFFICER 5 BROOKS, DERRICK 6 BROWN, DANA 7 BUFF, TIMOTHY 8 BURNELL, CHARLES 10 BUTCHER, BARBARA 11 BUTCHER, ROBERT SUPPLY 12 CERISIER, GIVENCHY 13 CHARLES, RADGLIFFE 14 CONRAD, KIMBERLY 15 COOPER, LEATHIA 16 CROPPER, PERVONE 17 CUMBERBATCH, GERWIN 18 CURRINGTON, LYNN MAIL ROOM 19 DANIELS, JULIUS 20 DAVIS, JULIUS 21 DEPAUL, RONALD 22 DEPAUL, RONALD 23 DIAMOND, WALLACE 24 EMIG, BRIAN 25 FIELDS, DORENE 27 FLAKES, LESLIE 27 FLAKES, LESLIE	CO DIAL , SEAN
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HOWARD R. YOUNG CORRECTIONAL INSTITUTION
DUTY ROSTER
11/08/04
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SHADE, JESSE	ROY, JOSETTE	ROEMER, WILLIAM	RIVERA, COURTNEY	REDMAN, LATOYA	RAWLEY, DONALD	PRINCE, KENYA	POWELL, JIVONNE	PELLE, PAUL	PALMA, RICARDO	NEWMAN , BARRY	NEWMAN, ANNETTE	NEAL, CHARLES	MCREYNOLDS, JERMAINE	MCGEE, NAVINIA	MARTELLI, STEPHEN	LOGAN, ROBERT	LIVINGSTON, JOHN	KINLOCH, VERONICA	KING, CONNIE	KOLONDER, CHAD	KADOW, MICHAEL	JOHNSON , DWIGHT	HITCHENS, MELVIN	HIGGINS, APRIL	HENRY, STANFORD	HEALY, JOHN	NGS	SON	HARGROVE, SHELTON	GRIFFIN , SHIRELLE	GOODALL, OSBORNE	GASSNER, RICHARD	ις Ω	
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HOWARD R. YOUNG CORRECTIONAL INSTITUTION
DUTY ROSTER
11/08/04
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11/08/04	DUTY ROSTER	R. YOUNG CORRECTIONAL INST
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FRINK, ADRIANE													WILLIAMS, JANELL	73 WHITE, JACQUELINE	72 WAYMAN, GLENN SICK CALL		THOMPKINS, ROGER	_	TALENTI, ANDREW	SUVIE, ANTHONY		STILL, DIONNE	SMITH-BOARDLEY, NANNETTE	SHINN, JAMES INFO. SYST. COORD.	NAME
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The state of the s								A STATE OF THE PARTY OF THE PAR															SCOTT, JEFFERY	KLINE, JAMES	MILLIGAN, TYSEAN	BANE, SAMUEL	BAROW, MARK	FAGAN, MALISSA	LISKIEWICZ, GREG	_		8X4 VHRS 11/08/04 TO 11/21/04	NAME	SHIFT COMMANDER 0800-1600
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OT DUTY ROSTER

ATTACH THIS PAGE TO DUTY ROSTER. SS# IS ONLY NECCESSARY IF OFFICER DOES NOT WORK AT THIS INSTITUTION

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		-			(bugh/AN)	Hamilton	EVANS	Johnson	Near	Coebett	Seneles	Stevens	Chora	(PANNON)	Sessoms	(Trowwelf)	OFFICERS LAST NAME
					Stephen (4412	LARRY (8X4		U		DAVID (STRO)	William (VHR)	$\sim$			~	JAMES CVHR	OFFICERS FIRST NAME
										093-48-9428						<u>)</u>	SSN#
					Ø	Ø	$\varphi$	$\mathcal{S}$	Ø	8	8	B	8	8	Ø	B	OT HOURS
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D00440

Case 1:06-cv-00104-JJF

Document 51-5 Filed 10/15/2007 Page 10 of 41

## **BUREAU OF PRISONS** OVERTIME REPORT

BUDGET UNIT#	006	BUDGET UNIT NAME	HRYCI
PERIOD WORKED	11-14-04	PAYCYCLE PAID	11-14-04
REASON FOR OVERTI	IME		TOTALS
ADMINISTRATIVE AWOL			<del></del>
CALLBACK			
CLASSIFICATION			
COURT			
COMPASSIONATE LEAVE	, , , , , , , , , , , , , , , , , , , ,		<del></del>
EXTRA DUTY - INSIDE			
EXTRA DUTY – OUTSIDE			
FMLA			
GYM VACANCY			
HEARINGS / INVESTIGATIO	NS / DISCIPLINARY		· · · · · · · · · · · · · · · · · · ·
INVENTORY			<del></del>
JURY DUTY			·····
LATE RELIEF			
LEAVE WITHOUT PAY			
MAILROOM / SUPPLY			
MEETING / UNION BUSINES	SS		
MILITARY LEAVE			<del> </del>
OUTSIDE HOSPITAL			16.
REPORTS			<del></del>
SHAKEDOWN			
SICK SUSPENSION			
TRAINING			
TRANSPORTATION:			
ξ FUNERAL RUN			
ξ INMATE TRANSF	ED		<del></del>
ξ MEDICAL RUN	Lik		
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ξ OTHER			<del> </del>
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VACANCY CORRE	ectional Ot	Heer:	- 88
VACATION	•		<u></u>
WEAPONS RECLASSIFICAT	NOL		
WORKMAN'S COMPENSAT	ION		•
OTHER: FIRE EQUIPTMENT	Γ .		
OTHER: ESCAPE DRILLS		•	
OTHER: EXECUTIONS			
OTHER: OUT OF STATE TR	ANSFERS		
OTHER: RECORDS			
OTHER: CODE		•	<del></del>
OTHER: SPECIAL PROJECT			
OTHER: CONSTRUTION, V			
OTHER: COMPUTER PROB	LEMS		
OTHER: WATCH CMDR.			*********
OTHER: RESIGNATION			<del> </del>
OTHER:	Thermal Th		<del></del>
TOTAL HOURS REPO	KIED		96.

Fil	led	10/	15/2	200	7	Pa	ge 1	11 of
TOTAL	K-9 OFFICERS	OFFICERS	CORPORALS	SERGEANTS	LIEUTENANTS	STAFF LIEUTENANT	CAPTAIN	TITLE
71	_	56	<b>o</b>	4	ω		0	NUMBER SCHEDULED
6oll	-	50		()			0	NUMBER
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S				_	_			VAC
0							•	НОГ
0								FMLA
0								LWOP
þ		2						MIL
5 (10 VACANCIES)		anagher-1	1-RES. DAYS OFF 1-VACANT		1-TEANSFER 1-VACANT			OTHER .

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Case 1:06-cv-00104-JJF

PREPARED BY:

SHIFT COMMANDER, (TITLE AND SIGNATURE)

REVIEWED BY:

SECURITY SUB

RINTENDENT (SIGN AND DATE)

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COMMENTS:

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SUNDAY

HOWARD R. YOUNG CORRECTIONAL INSTITUTION SHIFT CONTINUATION ROSTER

0800-1600

IN-Hase

# HOWARD R.YOUNG CORRECTIONAL INSTITUTION SHIFT COMMANDER'S REPORT

SHIFT COMMA	ANDEF	٤:	S/I	Lt. Saba	to	DAT	E: <u>11</u>	/14/04
DAY:	Sı	ınday	7	TIME AS	SUMED DUT	Y:	15:	20
I HAVE BRIEF	ED MY	RELIEF:	YES	<u> </u>	-	NO:	·	
RELIEVED BY	:	S	Lt. Lee			<del></del>		
OFF GOING SH	HFT C	OMMANDI	ER:		<u> </u>	S/Lt. Saba	to	-
ON COMING S	HIFT (	COMMAND	ER:		ک	/c1. L	2	<del>"</del>
			EGINN	ING EÇ	UIPTMENT (	COUNT		
.38 Revolvers	1	Shackles		8	Cutter	1	Gas Mask	3
Speed Loaders	7	Travial Ch	oina	Λ.	Canatan	-	C/C IZ	

.38 Revolvers	1	Shackles	8	Cutter	1	Gas M	íask –	3
Speed Loaders	2	Travel Chains	9	Capstun	1	S/C K	eys	22
.38 Rounds	18	Hacksaw	1	.40 S & W	6	Gas C	ards	19
Holsters	4	Crank	1	.40 Rounds	168	TBC	1502-	-1 OSH
Handcuffs	7	Sealed Keys	11	.40 Magazines	12	K9	Lee, J.	
Black Boxes	4	Locks	4			OSP	McCre	arv. J.

TIME	COMMENT	TS .
1520	S/Lt. Sabato relieves S/Lt. Polk after brief	ing
1600	Code Red / Formal Headcount	TBC 1502+1 OSH
1605	C/O McCreary, J. OSP with 1.38 Cal., 61	Rds. & 1 Speed Loader
	C/O Sessoms Lobby with 1 .38 Cal., & 6	
	C/O Lee K-9 with 1 .40 Cal., 28 Rds. & 2	
1619	Code Green	
1835	1 RELEASED BAIL	TBC 1501+1 OSH
2000	Code Red / Mid Shift Headcount	TBC 1501+1 OSH
2022	Code Green / DACS Green	
2105	Code 8 2D-Pod I/M Wilson, Julius #3656	665 Transferred to 1F-9 Admir
	Seg.	
2113	1 NEW COMMITMENT	TBC 1502+1 OSH
2114	CODE 8 10-1	
2300	Code Red / End of Shift Headcount	TBC 1502+1 OSH
2311	Code Green / DACS Green	
2315	S/Lt. Lee relieves S/Lt. Sabato after briefin	ng

Case 1:06-cv-00104-JJF	Document 51-5	Filed 10/15/2007	Page 13 of 41
SG SG LT: S	8 8 4 6		

SGT:	SGT: KIKER, M.	SIC CPL: CHUNDIU.	SIC CPL: WALL, D. V/166	LT: DYCH, W.	UNIT 3	UNIT 14: DUGGINS, H.	UNIT 13: JOHNSON, D.	SGT:	SGT: WILLIAMS, G.	LT: RYDER, R.	UNIT 2	UNIT 12: HAMBRIGHT, J.	P/C BKS: BURLEY, K.	P/C DRS: N'DIAYE, L // "	LOBBY CPL: SESSONS	.1.0S	SGT: DEFEO, G. AM	LT:	UNIT 1	UNIT 27: MCCREARY, J.	SICK CALL	OPERATIONS LT:	Of SHIFT SUPV:	SHIFT CMDR: SABATO, J.	DATE: 11/14/04
UNIT 15: ALEASKWLOW	V 2T: BAKER, S.	√ 2S: CLARK, V.	THE WERE MATHRISON	V 20: M		V	2C/D: WARMKESSEL, E.	2C/D:	1 2MB: ¥ MACK, B.	2A/B: DAVIES, K		<u> </u>	V	INCLEUS V BIR:	V B/R:	B/R: SMITH, B.	T y B/R: FIELDS, M.	SGT B/R: DIAL, W.	The state of the s					V	DAIL
UNIT 16: APA, B.	Vz: Lambert	V 2Y: COUGHLAN, S.	V 2W: ROBINSON, B.	V zv: Carmona (VHR)		F/C:	V2G/H: JOHNSON, P.(VHR)	2G/H: MILLER, S.	V2E/F: ★ POWELL, D.	2E/F: SEARLES, W.(VHR)		1E/F: BRYANT, L.	1E/F: DENNY, R. Chud,		1CID: POWELL OF YOUNG	70	VINB:* MCCAERRY M.	/ 1MB:		K.9: LEE, J.	SECURITY TEAM: WARREN, R.	SECURITY TEAM: D'ANIELLO, A	SECURITY TEAM: FARRINGTON, G.	SECURITY TEAM CPL: STEVENS, J.	DAILY ROSTER: 4X12 SHIFT
V GYM:	ı	VIDM ROVER: 6ALL	DORM 2: JOHNSON, K.	DORM 1: HOOKS, D.		F/C:	НАСКЕТТ, D.	-	*	V 2J/K: KLINE, J.(VHR)	i	/ 1E/F: MATTHEWS, K.	<u> </u>		V (D) DORM 4: JOHNSON, H.	DORM 4:		INF: WOLOSZYN, C.			· ·	/	/	MISC:	
		٠						CUFFAM																	DAY: SUNDAY

A000268

Daily Roster: 8x4 Shift	Multi-Purpose Criminal Justice Facility

DAIE:71-74-04				SUNDAY
VAC/ HOL/MILITARY	OVERTIME	VHR'S	OUTSIDE HOSPITAL	ROOM#
GOODALL MLWOP	- And the state of	PRITCHETT F/S	VLARRY HAMILTON	ChrisTi Hosp 2308
PRINCE, K. W/C		SAVAGE M/S		H 11 ti
HAMMOND MLWOP		GRIFFIN S/S		
DEPAUL, R. MLWOP	0	LISKIEWICZ F/S		
굤				
SHEETS VAC		BAROW M/S		
WILLIAMS VAC				
ROBMER HOS		MILLIGAN M/T	V /	
BUFF ADS		SCOTT T/F	<b>\</b>	
Richards VAC				
				OFFENDER
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5 LAWRENCE, PHILLIP 4 DEFEO, GREGORY 3 ROWE, JOHN

FRENCH, STEPHEN MEDFORD, JOSEPH

KIKER, MARY

ဖ

WALL, DAVID

WILLIAMS, GARLAND VARGAS, RAMON

STEVENS, JAMES SESSOMS, SONIA EDWARDS, JUNE

CORPORALS

4 DYCH, WALTER

SENATO, KEVIN

SABATO, JOSEPH STAFF BAMFORD, DAVID

RYDER, ROBERT

3 LORAH, PETE

4 LEE, JAY

2 PRITCHETT, MICHAEL VAF

PARKER, PHILIP VARVAR

# HOWARD R. YOU NOL

11/08/04	DUTY ROSTER	JNG CORRECTIONAL
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ORD, DAVID CAPTAIN	SU/MO						***
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TO, KEVIN LT.	OW/US						
	FR/SA	X	15/w A.	AALA UT.			
R,ROBERT LT.	WE/TH	X	ULATA A ARIA LT.	9 AGA 2T.	TEMPORARY ASSIGNED		
LT.	TUME						
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ER, PHILIP VARVAR CAPT.	VAR			_			
HETT, MICHAEL VARVARLT	VAR						
H, PETE K-9	SU/MO	$\setminus$	<del>_</del>				
JAY K-9	WE/TH	X	_		SUNDAY AND MONDAY ONLY	1500-2300 HOURS	
K-9	VHR					-	
SERGEANT'S							
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CH, STEPHEN		$\overline{}$					
	TUME	Merop					
ORY	THFR	×	UNITI	1/1/6			
RENCE, PHILLIP	МО/ТU	TARKS					
R, MARY		×	UNIT3	1/12			
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, DAVID	Мо/ти	×	S/k				
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34 LAMBERT, ROBERT	33 JORDAN, LEWIS	32 JONES-NDIAYE, LOLITA	31 JOHNSON, KELLI	30 JOHNSON, HARRY	29 JOHNSON, DAVID	28 JOHNSON, COREY	27 INCE, GARY	26 HOOKS , DESIREE	25 HAMBRIGHT, JESSE	24 HACKETT, DWIGHT	23 GALLI, BRIAN	22 FIELDS, MICHAEL	21 FARRINGTON, GREGORY S/T	20 FABRES, EDUARDO	19 EVANS, LARRY	18 DUGGINS, HORACE	17 DIAL, WAYNE	_	15 DAVIES, KERRY	14 DANIELLO, ANGELO S/T	13 CUSTER, ELLYN	12 COUGHLAN, STEPHEN	11 COLEMAN, ALLEN OPS	10 CLARK, VERON	9 CHUKUNNEYE, NNABUGWE	8 CARLOCK, DONALD	7 CANNON, MARK	6 CAMPBELL, EWONNU	5 BURLEY, KATRINA	4 BRYANT, LYLE	3 BLUE , MARK	2 BAKER, SIDNEY	1 APA, BRADFORD	OFFICERS	NAME	SHIFT COMMANDER 1600-2400
WE/TH	SA/SU	TH/FR	WETH	TUME	FR/SA	SA/SU	TUWE	FR/SA	THIFR	TH/FR	THIFR	FR/SA	TUWE	MO/TU	MO/Tu	FR/SA	THIFR	TUWE	FR/SA	WE/TH	MO/TU	TUME	SA/SU	WE/TH	SA/SU	FR/SA	WE/TH	SA/SU	FR/SA	TUME	SU/MO	MO/TU	FRVSA		DAY	
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HOWARD R. YOUNG CORRECTIONAL INSTITUTION
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11/08/04

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Page 18 of 41 Case 1:06-cv-00104-JJF Document 51-5 Filed 10/15/2007 69 70 71 72 73 SHIFT COMMANDER 1600-2400 OFFICERS CURTIS, STEPHANIE POWELL, DONALD NAME DAY OFF SA/SU MO/TU WE/TH WE/TH TH/FR SU/MO мелн 2 4/5 (C) }> ++ HOWARD R. YOUNG CORRECTIONAL INSTITUTION
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ATTACH THIS PAGE TO DUTY ROSTER. SS# IS ONLY NECCESSARY IF OFFICER DOES NOT WORK AT THIS INSTITUTION

HOWARD R. YOUNG CORRECTIONAL INSTITUTION OVERTIME DUTY ROSTER
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## **BUREAU OF PRISONS** OVERTIME REPORT

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IN THE SU LOR COURT OF THE STATE OF LAWARE

IN AND FOR NEW CASTLE COUNTY

STATE OF DELAWARE

V.

CASE NO. 9703008667 CR.A. NO. IN97041239

CHRISTOPHER J BARKES

CHARGE: VEH.HOM. 2ND

DOB: 12/12/66 SBI: 00361999

CHARGE DISP: PLED GUILTY

SENTENCE ORDER

NOW, THIS 12TH DAY OF SEPTEMBER, 1997, IT IS THE ORDER OF THE COURT THAT:

THE DEFENDANT IS ADJUDGED GUILTY OF THE OFFENSE CHARGED.

THE DEFENDANT IS TO PAY THE COST OF PROSECUTION.

EFFECTIVE MARCH 16,1997, THE DEFENDANT IS PLACED IN THE CUSTODY OF THE DEPARTMENT OF CORRECTIONS AT SUPERVISION LEVEL 5 FOR A PERIOD OF 3 YEARS.

AFTER SERVING 1 YEAR AT SUPERVISION LEVEL 5, THIS SENTENCE IS SUSPENDED FOR 2 YEARS AT SUPERVISION LEVEL 4 - SUBSTANCE ABUSE TREATMENT PROGRAM. UPON SUCCESSFUL COMPLETION OF THE TREATMENT PROGRAM, THIS SENTENCE IS SUSPENDED FOR THE BALANCE AT SUPERVISION LEVEL 3.

THE DEFENDANT IS TO BE HELD AT SUPERVISION LEVEL 5 UNTIL SPACE IS AVAILABLE AT SUPERVISION LEVEL 4.

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PAGE 001 OF 5

STATE OF DELAWAR ... CHRISTOPHER J BARKES 9703008667

AS TO THE CHARGE OF IN97041240, VEH.HOM. 2ND, IT IS THE ORDER OF THE COURT THAT:

THE DEFENDANT IS ADJUDGED GUILTY OF THE OFFENSE CHARGED.

THE DEFENDANT IS PLACED IN THE CUSTODY OF THE DEPARTMENT OF CORRECTION AT SUPERVISION LEVEL 5 FOR A PERIOD OF 3 YEARS.

AFTER SERVING 18 MONTHS AT SUPERVISION LEVEL 5, THIS SENTENCE IS SUSPENDED FOR 18 MONTHS AT SUPERVISION LEVEL 2,

THIS SENTENCE SHALL BE SERVED CONSECUTIVELY TO THE SENTENCE IN CR.A. NO. IN97-04-1239.

THE NON-INCARCERATIVE PORTION OF THIS SENTENCE SHALL BE SERVED CONSECUTIVELY TO THE NON-INCARCERATIVE PORTION OF THE SENTENCE IMPOSED IN CR.A. NO. IN97-04-1239.

STATE OF DELAWAR CHRISTOPHER BARKES 9612002900

AS TO THE CHARGE OF IN97010130, POSS, USE, CONS.N, IT IS THE ORDER OF THE COURT THAT:

THE DEFENDANT IS ADJUDGED GUILTY OF THE OFFENSE CHARGED.

THE DEFENDANT IS PLACED IN THE CUSTODY OF THE DEPARTMENT OF CORRECTION AT SUPERVISION LEVEL 5 FOR A PERIOD OF 1 YEAR.

THIS SENTENCE IS SUSPENDED FOR 1 YEAR AT SUPERVISION LEVEL 2.

THE NON-INCARCERATIVE PORTION OF THIS SENTENCE SHALL BE SERVED CONSECUTIVELY TO THE NON-INCARCERATIVE PORTION OF THE SENTENCE IMPOSED IN CR.A. NO. IN97-04-1240.

STATE OF DELAWARL V. CHRISTOPHER BARKES, 9703008667 9612002900

THE FOLLOWING CONDITIONS SHALL APPLY TO THIS SENTENCE, THE DEFENDANT SHALL:

PAY FINANCIAL OBLIGATIONS DURING THE PROBATIONARY PERIOD.

BE EVALUATED FOR SUBSTANCE ABUSE AND FOLLOW ANY DIRECTIONS FOR COUNSELING, TESTING, OR TREATMENT MADE BY THE PROBATION OFFICER.

BE EVALUATED FOR EMOTIONAL AND/OR PSYCHOLOGICAL PROBLEMS AND FOLLOW ANY DIRECTIONS FOR TREATMENT OR COUNSELING MADE BY THE PROBATION OFFICER.

HAVE NO CONTACT WITH THE VICTIMS' FAMILIES.

JUDGE CARL GOLDSTEIN

STATE OF DELAWAR. .. CHRISTOPHER BARKES, 9703008667 9612002900

FINANCIAL OBLIGATIONS ARE IMPOSED ON THE DEFENDANT PURSUANT TO THIS SENTENCE AS FOLLOWS:

TOTAL TOTAL TOTAL	CDEFA-DIVERSION ORDERED CIVIL PENALTY ORDERED COSTS ORDERED DRUG SURCHARGE ORDERED FINE AMOUNT ORDERED	0.00 0.00 77.80 0.00
TOTAL TOTAL TOTAL	FORENSIC FINE ORDERED	0.00 0.00 0.00 0.00 50.00
TOTAL TOTAL TOTAL	RESTITUTION ORDERED SHERIFF SUSSEX ORDERED VICTIMS' COMP ORDERED VIDEO PHONE FEE ORDERED	0.00 0.00 0.00
TOTAL	FINANCIAL ORDER	127.80

PC-11.04.026

### **Offender Status Sheet**

Date: 11/13/2004

\$BI#:

00361999

Name: CHRISTOPHER BARKES

ation(s): <u>SCN</u>

Level(s): 3,4H

Race: WHITE

DOB: 12/12/1966

AKA:

CHRISTOPHER J BARKES: CHRISTOPHER V BARKES: CHRISTOPHER S BARKES

Offender Type:

Officer(s): Doherty, Robin M. (14)

Start Date:	11/01/2004	MED:04	/30/2005	STRD	: 04/30/20	05 ADJ: 0	4/30/	2005		PED:	Statu	ory Days Ea	arned:	
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Special Conditions:

0401020740

4H CRT1

Other Conditions:

Sent. on 11/01/04, by Comm. Patricia Tate-Stewart/FCNC, for charge of VOP-0401020740: As of 11/01/04 - VOP - sent, dated 03/15/04 is revoked and def. is sent. as follow: Commitment at LV-5 for term of 1 yr. 30 days, of which 1 yr. 30 days is susp, for commitment at LV-4/HCP for 6 mos., followed by 6 mos. LV-3. LV-4, hold at 3.

met

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WARRANT# 8787



**PCCC Plummer Community Corrections Center** 38 Todds Lane **WILMINGTON DE, 19802 5773** Phone No. 302-577-3039 Fax No. 302-577-2849

# ADMINISTRATIVE WARRANT - Standard

Warrant Date: 11/13/2004

RE: Barkes, Christopher

SBI#: 00361999

R/S: W/M DOB:12/12/1966

Judge/Court: The Honorable PATRICIA STEWART / New Castle County Family Court

Charge(S) : 0401020740 - 0401020740 - VIOL O/PROBATN

The above named offender is under Level 4 HC supervision by the Department of Correction and is alleged to be in

violation of their conditions of supervision.

I. Doherty, Robin M

,a Probation/Parole Officer of the Department of Correction, do hereby deputize any

Sheriff, Constable, or Peace Officer of the State of Delaware to arrest and detain:

Barkes, Christopher

persuant to 11 Del. Code, 4334(b) and/or 4352(a).

Warrant Comments: Blue Warrent

Blue Warrent

Blue Warrent #PC-11-04-026

Mr Barks was sentenced by Commisioner P. Stewart on 11-01-04 in family court for VOP, The VOP sentence dated 03-15-04 was revolked and the defendant was ordered to serve 1 yr and 30 days at L-5 which was susp. for 6 mo at L-4 HCP, Defendant was ordered to be supervised at L-3 until space availale at L-4. Mr Barker reported to began his supervision on 11-03-04 and Did violate the conditions of supervision.

IT IS ALLEGED THAT THE FOLLOWING CONDITION(S) OF SUPERVISION HAS (HAVE) BEEN VIOLATED:

ு Condition # : <u>PGMV</u> Other Program Violation

As to condition #1 You will not commit a new criminal or motor vehicle offense while under supervision.

To Wit .. On 11-13-04 offender Barker was arrested by Officer Mcloughlin of WPD and charged with loitering

for the purpose of purchasing drugs, He was also charged with driving while revolked.

A VOP HAS BEEN SUBMITTED REQUESTING A CAPIAS BE ISSUED. (Circle One) YES

Administrative Warrant must be faxed to the sentencing judge and the Pre-Sentence office upon arrest.

SIGNED:

Uni

Case 1:06-cv-00104-JJF Document 51-5 Filed 10/15/2007 Page 34 of 41

Original

RECEIVED

# HEALTH CARE SERVICES CONTRACT

2002 JUN 21 PM 2 04

BUSINE 30 Unit This Agreement is made this 17th day of June 2002, by and between First Correctional Medical-Delaware, L.L.C. ("FCM") and the State of Delaware, Department of Correction ("DOC").

#### RECITALS

WHEREAS, the DOC desires to purchase the health care services offered by FCM to serve the needs of the State of Delaware and the State's immate population; and WHEREAS, the State has asked prospective vendors to submit proposals for contract No. 2828; and

WHEREAS, FCM's sole member (First Correctional Medical, Inc.) submitted a proposal to provide the aforementioned health care services to the DOC and its proposal was accepted by the DOC; and

WHEREAS, on Wednesday May 29, 2002, the DOC and FCM's sole member entered into final negotiations with the express intent to execute a contract for the provision of health services to Delaware's incarcerated population; and

NOW THEREFORE, in consideration for the mutual promises contained herein, the parties enter into this Agreement and its related documents to govern their relationship and hereby revoke any previous agreement between the parties. All references in said documents to "FCM" or "First Correctional Medical, Inc." or "First Correctional Medical" shall be deemed a reference to FCM as if FCM made the proposal and agreements set forth in or under such documents and was the successful bidder. The Terms and Conditions of this Agreement are contained within this DOC/FCM health care services contract which shall include by this reference the Request for Proposal, FCM's Proposal and the FCM Question and Response Memorandum dated May 21, 2002; and

NOW THEREFORE, the DOC and FCM mutually agree as follows:

- This agreement is contingent upon funding being appropriated by the State of Delaware for each year of this contract. Funding is appropriated for medical services through the annual State Budget Act.
- 2. The DOC and FCM agree on an annual base price of \$17,735,904.00 for the 1<sup>st</sup> two years of the contract. FCM shall submit to DOC an invoice on or about the 15<sup>th</sup> and last day of each month during the term of this contract commencing on July 15<sup>th</sup> of each fiscal year. Each invoice shall be for one twenty-fourth of the annual base price due hereunder for each year of this contract. DOC shall pay each invoice within 5 days of receipt. The amount of said monthly payment shall change in the event of any mutually agreed to change in the annual base price for any year that this contract remains in effect or as otherwise provided under the contract documents including any schedules which are a part thereof or which are attached hereto (which shall be deemed a part hereof).

Additional modifications to the DOC Request and FCM's Proposal:

- A. The Sex Offender Unit has been deleted.
- B. Three Transition Units and a Structured Care Unit currently are in operation. The Transition Units are at Plummer Community Correctional Center, Multi-Purpose Criminal Justice Facility and Baylor Women's Correctional Institution. The Structured Care Unit is at Sussex Correctional Institution.
- C. Subject to the terms hereof and the documents referred to herein, the required Vendor services include but are not limited to basic medical services, mental health services, dental services, continuous suicide watch, the transition units, structured care programs, specialized women's services, and services to DOC staff. A complete itemization of services is in the DOC's RFP, as limited by FCM's Proposal.
- 3. The DOC accepts the variable rate per inmate proposed per year by FCM for times when the count is over the 6700-offender base as shown on the attached schedules which are made a part hereof. After each month, FCM and DOC shall

agree to a reconciliation of the number of inmates for the prior month (over a base of 6700). Any additional payment (based on the attached schedule) due FCM as a result of any number of inmates over the base amount shall be paid to FCM with the next payment due hereunder.

- 4. Annual increases will be in accordance with the revised Cost Summary Sheet presented in FCM's proposal reflecting the new base of \$17,735,904.00 and the other terms and provisions hereof.
- 5. FCM and the DOC agree to modify the RFP and Proposal as follows:
  - A. To the extent ACA Health Care Standards and NCCHC Standards differ, FCM will adhere to the higher standard;
  - B. To the extent that community standards for mental health care are unclear or not specific, FCM will be required to implement "Best Practices" from State Correctional Systems, which shall be deemed to be the average national level of such services.
  - C. Clarify language in the FCM proposal to read:
    - a) Pg. 26, paragraph 1, last sentence. Be it known that the DOC does not authorize the transfer of inmates to a detoxification facility.
    - b) Pg. 60, "Response to trauma incidents", second paragraph, last sentence should read: "These reports will be provided to the warden or designee, and others as appropriate in the corrections chain of command prior to the end of shift in which the incident occurred."
  - D. Contract provides for a capitated rate for health care services. Fee structure is established by the base rate (as adjusted) plus per diem rate for inmate population over 6700. Structural changes and/or additions to institutions will not result in a renegotiated rate for service.

- E. The parties acknowledge that DOC shall pay for any equipment and services (including software and the charges for installation and training relating thereto) which are necessary, required or requested by FCM under the operation of this contract which individually exceeds \$500.00 per individual item. All equipment, supplies and facilities currently in place at or located within the facilities at which the services shall be provided shall be made available to FCM at no cost to or credit against FCM in connection with the performance of its services hereunder. In addition, DQC shall provide at its cost and expense all maintenance services required or requested by FCM in connection with any equipment or any part of the facilities.
- F. Out of the first two payments due FCM hereunder, DOC shall retain a total sum of \$500,000.00 (\$250,000.00 in each of the first two payments) to insure the observance and performance of all of the covenants, terms, conditions and undertakings herein contained to be performed or observed by FCM. Said security deposit or the balance thereof shall be returned to FCM not more than thirty (30) days following the termination or expiration of this contract provided that FCM has materially performed and observed all of said covenants, terms, conditions and undertakings herein. No other bond, guaranty or other deposit, security or assurance shall be due, required or owed by FCM.
- G. Any financial reporting obligations shall be limited to FCM.
- H. In no event shall staffing levels constitute a breach or default by FCM hereunder.
- I. In the event that FCM does not receive payment on or before the 30 day following the receipt of an invoice by the DOC, the amount due on the invoice shall bear interest at an annual rate of 12.00% (or the maximum rate allowed by law, whichever is lower) until said payment is made in full.

6. The DOC is purchasing Professional Health Services. Performance is the essence of this contract. To the extent, negotiations involved a discussion of staffing patterns; those discussions were intended to ensure FCM fully understood the scope of the contract.

### 7. Appropriation

Funds authorized for use under the contract are obligated within the budget period (fiscal years July 1- June 30) of which they are awarded. Contracts and purchase orders must be issued on or before the expiration date of the budget period or the funds will no longer be available for use by the vendor. If funds are not appropriated at the amounts established by this contract each party shall have the right, to be exercised with not less than 60 days prior notice to the other, to terminate this contract and all payment and service obligations hereunder and relating hereto. However, said termination right may only be exercised with an effective date of the last day of the last month of a fiscal year of the term of this contract. At no time will the level of services go below those specified by the NCCHC Prison Standards.

## 8. DEPARTMENT INDEMNIFICATION

The FCM will hold harmless, indemnify, and defend the DOC, the State of Delaware and their agents, employees, or officers of the State of Delaware from any and all suits, actions, losses, liability, damages (including punitive damages), expenses, reasonable attorney fees (including salaries of attorneys regularly employed by the State of Delaware), judgments, or settlements incurred by the DOC, the State of Delaware or their agents, employees, or officers arising out of the negligent provision of health care services by FCM, its employees, or subcontractors under the contract, including direct or indirect negligence or intentional acts of omission or commission, and professional malpractice regardless of any negligence or any intentional acts of omissions or commission by employees or officials of the DOC.

## 9. APPLICABLE LAW/GOVERNING LAW/ CHOICE OF LAW

The laws of the State of Delaware shall apply, except where Federal Law has precedence. FCM consents to jurisdiction and venue in the State of Delaware. The DOC shall enter a Purchase Order on or before June 30, 2002. The Purchase Order must be approved on July 8 2002 or this contract shall be null and void and of no force or effect. FCM must possess an active Delaware Business License as issued by the Department of Finance through its Division of Revenue. FCM must remain in good financial standing with the State of Delaware.

If any provision of this contract is held by a court of competent jurisdiction to be contrary to law, the remaining provisions of this contract will remain in full force and effect.

FCM's sole member shall have no right, title, obligation or liability hereunder or under any document referred to herein unless hereafter expressly accepted and agreed to thereby.

#### 10. TERMS AND RENEWAL OPTIONS

Subject to the other terms and provisions hereof, the initial term ("Initial Term") of this contract shall be for a period of 6 years commencing July 1, 2002 (" the Commencement Date") and expiring (unless renewed) on June 30, 2008. This contract is renewable by the DOC for two (2) additional periods of two (2) years each ("the Extended Term"), according to the terms of the RFP.

If DOC defaults hereunder, FCM may, at its discretion, terminate this contract upon not less than thirty days written prior notice.

### 11. CONFLICT RESOLUTION

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The contract documents shall consist of this contract, the Request for Proposal, the FCM Proposal, and the FCM Question and Response Memorandum dated May 21, 2002, as well as all cost and other updates relating thereto and the schedules, grids and other attachments attached hereto which are hereby made a part hereof. In the event of any conflict between the contract documents, the contract documents

will be interpreted in the following order and the lower number below shall govern and control:

- 1. This Contract and the summary sheet, pricing grid, and the other schedules, grids and attachments hereto.
- 2. FCM's response to DOC written questions dated 5/21/2002 (the FCM Question and Response Memorandum dated May 21, 2002)
- 3. Request for Proposals (including any amendments and updates and other questions and answers)
- 4. FCM Proposal and any updates relating thereto

STATE OF DE	<b>LAWAR</b>	E /
DEPARTMENT	OLCOI	RECTION

BY:

TITLE: Commissioner

DATE: 6/17/02

FIRST CORRECTIONAL MEDICAL

DELAWARE, L.L.C

TITLE: President

DATE: 6/17/02

#### ADDENDUM TO HEALTH CARE SERVICES CONTRACT #2828

### TO ESTABLISH A PROCEDURE FOR REIMBURSEMENT OF PAYMENT TO THE DEPARTMENT OF HEALTH AND SOCIAL SERVICES (DHSS) FOR MEDICAID ELIGIBLE INCARCERATED PERSONS

In accordance with the agreement between DHSS and FCM, incarcerated persons under the custody of the Delaware Department of Corrections (DOC) who incur inpatient hospital stays greater than 24 hours, in an acute care hospital with a Delaware Medicaid provider agreement, shall be considered for Medicaid.

It is agreed that the DOC will reimburse DHSS for 100% of the Medicaid per discharge and outlier payments and ancillary payments made for incarcerated. persons. FCM understands that DOC will then recover 100% of the Medicaid discharge and outlier and ancillary payments by reducing payments DOC makes to FCM. All payments will be made in accordance with the payment schedule defined in the contract agreement #2828.

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Department

First Correctional Medical

Delaware, L.L.C.

Title: President

*9118/83* Date: